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*Attorneys for Relators and Plaintiff-Relator*

**IN THE UNITED STATES DISTRICT COURT  
FOR THE CENTRAL DISTRICT OF CALIFORNIA**

**[UNDER SEAL],**  
Plaintiffs,

v.

**[UNDER SEAL],**  
Defendants.

**CASE NO. CV 18-08311-ODW(AS)**

**PART 2 OF 13  
(EXHIBITS 19 – 28)**

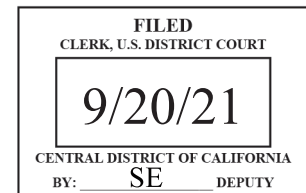
**FOURTH AMENDED COMPLAINT**

**[FILED IN CAMERA AND UNDER SEAL  
PURSUANT TO 31 U.S.C. § 3730(b)(2)]**

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**IN THE UNITED STATES DISTRICT COURT**  
**FOR THE CENTRAL DISTRICT OF CALIFORNIA**

**UNITED STATES OF AMERICA** *ex rel.* **IONM LLC**, a Delaware corporation  
and *ex rel.* **JUSTIN CHEONGSIATMOY, M.D.;**  
**STATE OF CALIFORNIA** *ex rel.* **IONM LLC**, a Delaware corporation and  
*ex rel.* **JUSTIN CHEONGSIATMOY,**

**CASE NO. CV 18-08311-ODW(AS)**

**PART 2 OF 13**  
**(EXHIBITS 19 – 28)**

**FOURTH AMENDED COMPLAINT**

1 **M.D;** and **LOS ANGELES COUNTY** *ex*  
2 *rel.* **IONM LLC**, a Delaware corporation;  
3 and *ex rel.* **JUSTIN**  
4 **CHEONGSIATMOY, M.D.**, and  
5 **JUSTIN CHEONGSIATMOY, M.D.**, in  
6 his individual capacity

7  
8  
9 Plaintiffs,

10  
11 v.

12 **UNIVERSITY OF SOUTHERN**  
13 **CALIFORNIA**, a California corporation;  
14 and

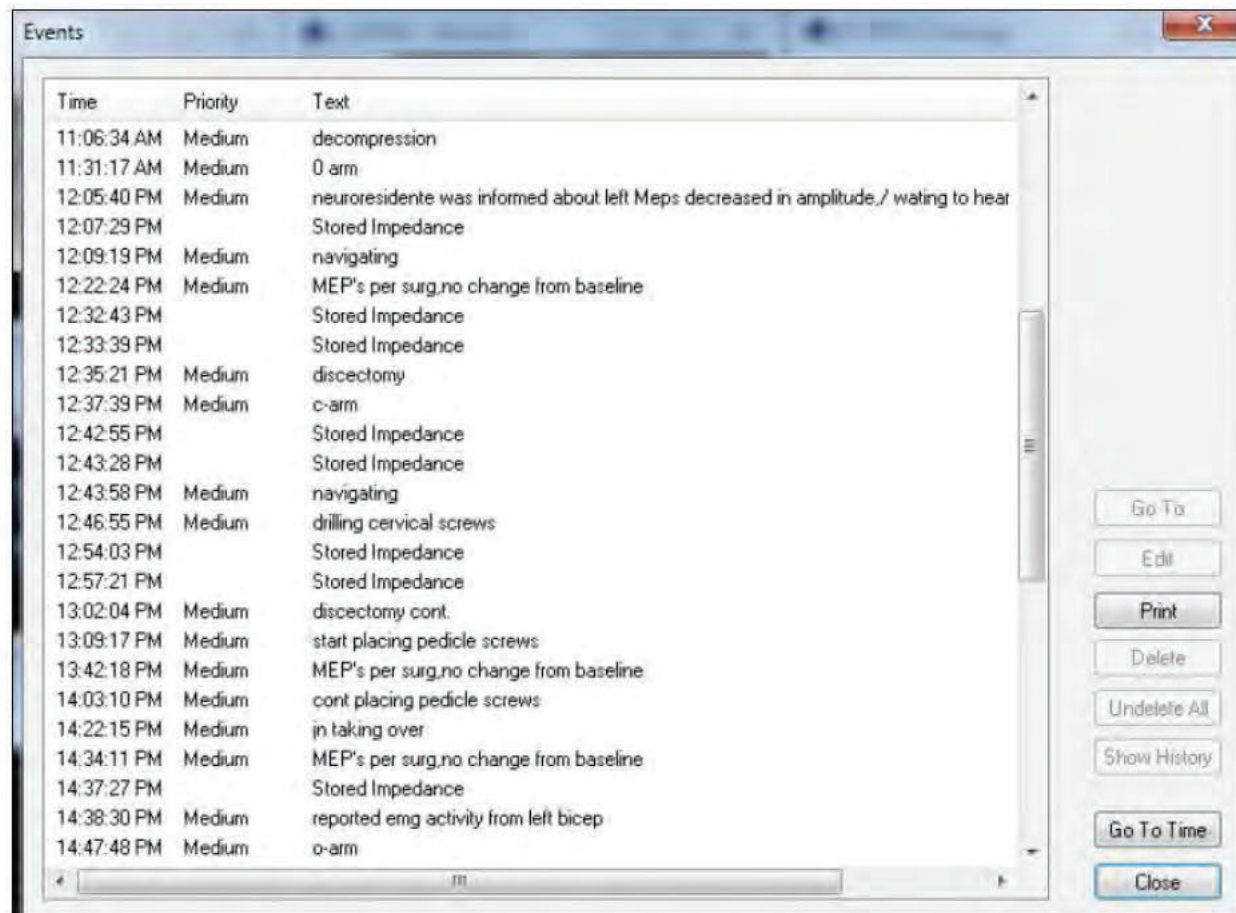
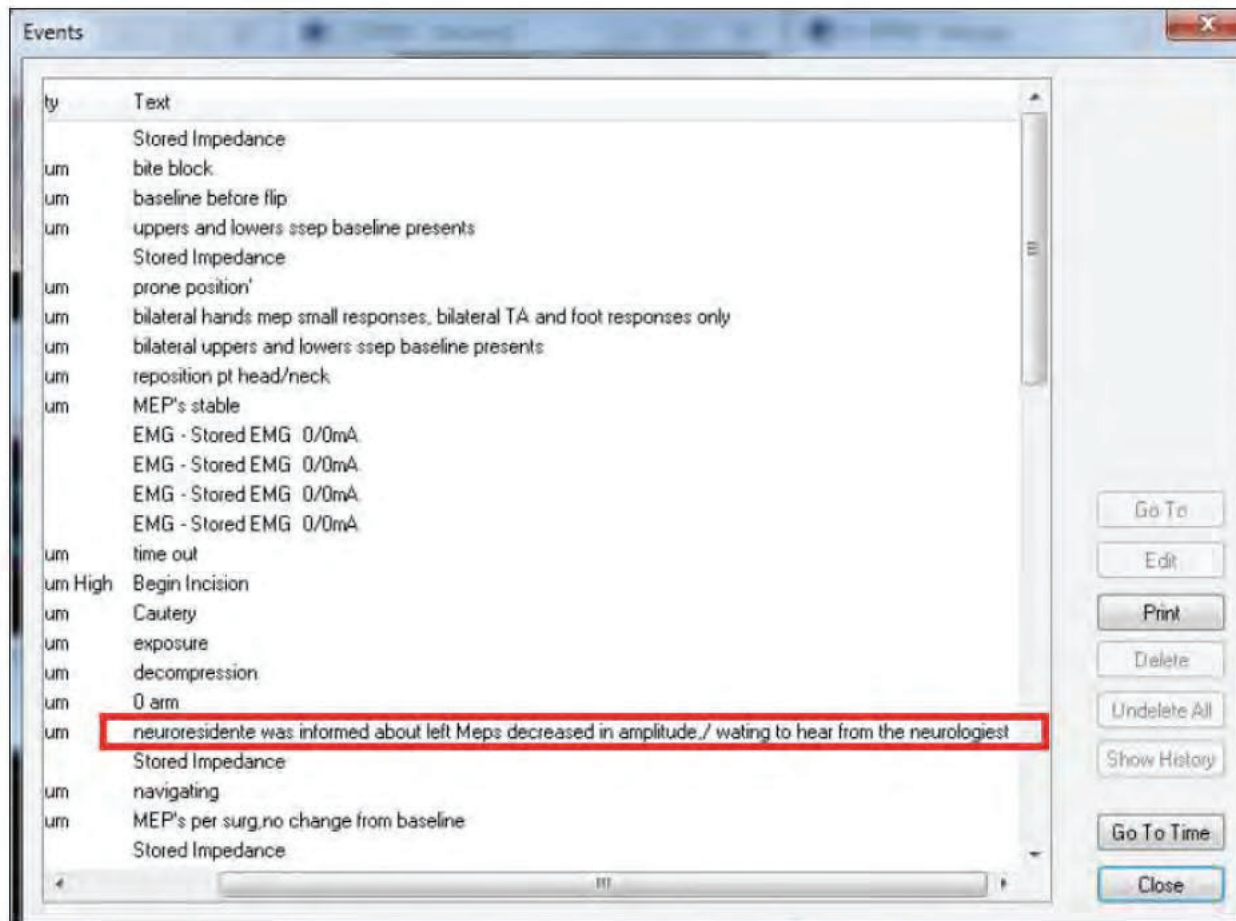
15 **USC CARE MEDICAL GROUP, INC.**,  
16 a California corporation,

17  
18 Defendants.

19  
20 **[FILED IN CAMERA AND UNDER SEAL**  
21 **PURSUANT TO 31 U.S.C. § 3730(b)(2)]**  
22  
23  
24  
25  
26  
27  
28

# Exhibit 19





Events				
Time	Priority	Text		
14:38:30 PM	Medium	reported emg activity from left bicep		
14:47:48 PM	Medium	o-arm		
15:01:40 PM		Stored Impedance		
15:04:39 PM		Stored Impedance		
15:06:47 PM	Medium	informed surgeon of bilateral hand meps reduction		
15:07:24 PM		Stored Impedance		
15:07:38 PM	Medium	map 124		
15:10:12 PM	Medium	hr 106, bp 141/83(108), tcore 36.5		
15:14:34 PM	Medium	placing screws		
15:15:39 PM	Medium	MEP's per surg.no change from baseline		
15:15:57 PM	Medium	informed surgeon of variability in mep responses; surgeon acknowledged		
15:20:42 PM		Stored Impedance		
15:39:32 PM	Medium	screws cont.		
15:46:51 PM	Medium	cutting rods		
15:47:14 PM	Medium	MEP's per surg.no change from baseline		
15:55:54 PM	Medium	placing drain		
15:59:25 PM	Medium	placing bone graft		
16:00:11 PM	Medium	MEP's per surg.no change from baseline		
16:01:37 PM		Stored Impedance		
16:06:40 PM	High	Closing		
16:35:29 PM		Stored Impedance		
16:41:55 PM		Stored Impedance		
16:59:01 PM	Medium	informed surgeon of bilateral hand mep reductions		
16:59:30 PM	Medium	final sseps stable		
17:00:28 PM	Medium	end monitoring		

Go To  
Edit  
Print  
Delete  
Undelete All  
Show History  
Go To Time  
Close

Task: Edit View Patient Chart Links Notifications Navigation Help

Home Message Center Patient List Schedule Viewer Physician Handoff Discharge Dashboard KeckCare Assist Case Selection Clinical Management Reports Quality Measures My Experience Lescomp

Tear Off Suspend Charges Edit Calculator Explore Menu Ad Hoc Medication Administration PM Conversation Depart Communicate Patient Education Direct Address Book

Age: 50 years Sex: Male \*\* No Known Allergies \*\* MRN: [REDACTED]  
DOB: [REDACTED] MyUSC Chart: No Not Interested - (11/16/...)  
Inpatient (Admit Dt: 8/13/2017 13:28:00 PDT Disch Dt: 8/18/2017 11:00:00 PDT) Attending: GMLDS | DRG: 6.3 day(s) | 471 - CER... Blood Trans Acceptable to PT: Yes

Menu - All Ambulatory Views

Neurology Pro... Ambulatory W... Ambulatory Su... Discharge Sum... Ambulatory Qu... Anes. Acute Pa... Discharged

Inpatient Discharge Meds as Rx All

Selected visit:

Charge	Description	Status	Order Date	Order Time
CHARGE 95861	Needle EMG, 2 extremity	Completed	09/26/17	13:13
CHARGE G0453	Cont IONM out OR, 1:1/15 min	Completed	09/26/17	13:13
CHARGE 95939	TcMEP, upper and lower limbs	Completed	09/26/17	13:13
CHARGE 95937	Neuromusc Junc tst, 1mth/nrv	Completed	09/26/17	13:13
CHARGE 95938	Short-lat SSEP, up&low limbs	Completed	09/26/17	13:13
CHARGE 99232	Sbq IP Care-Mod (25 min)	Completed	08/27/17	22:56
CHARGE 99291	Critical care 1st 30-74 min	Completed	08/27/17	22:55
CHARGE 99232	Sbq IP Care-Mod (25 min)	Completed	08/17/17	10:24
CHARGE 99223	Init IP	Completed	08/16/17	

Subsequent Hospital Care

- Inpatient Consultation
- Prolonged Services Direct Contact
- Inpatient Discharge Service
- Critical Care Visits

Order: CHARGE G0453 Cont IONM out OR, 1:1/15 min

Order Details: Closed fracture of cervical spine with spinal cord lesion,

# of Tests: 33, Date of Service 08/15/17

Order Comments:

Order Date/Time: 09/26/2017 13:13

Start Date/Time: 09/26/2017 13:13

Status: Completed

Ordered by: SHILLIAN DO, PARASTOU

CHARGE 92583 EVK poten/resp audio, compri 25: Professional Component

Electrocoricogram/Intraoperative Monitoring

CHARGE 95829 Electrocoricogram at surg 25: Professional Component

CHARGE 95940 Cont IONM in OR, 1:1/ea 15min

CHARGE 95941 Cont IONM out OR, 1:1/ea 15min

CHARGE 95942 Cont IONM out OR, 1:1/ea 15min

CHARGE 95943 Cont IONM out OR, 1:1/ea 15min

CHARGE 95944 Cont IONM out OR, 1:1/ea 15min

CHARGE 95945 Cont IONM out OR, 1:1/ea 15min

CHARGE 95946 Cont IONM out OR, 1:1/ea 15min

CHARGE 95947 Cont IONM out OR, 1:1/ea 15min

CHARGE 95948 Cont IONM out OR, 1:1/ea 15min

CHARGE 95949 Cont IONM out OR, 1:1/ea 15min

CHARGE 95950 Cont IONM out OR, 1:1/ea 15min

CHARGE 95951 Cont IONM out OR, 1:1/ea 15min

CHARGE 95952 Cont IONM out OR, 1:1/ea 15min

CHARGE 95953 Cont IONM out OR, 1:1/ea 15min

CHARGE 95954 Cont IONM out OR, 1:1/ea 15min

CHARGE 95955 Cont IONM out OR, 1:1/ea 15min

CHARGE 95956 Cont IONM out OR, 1:1/ea 15min

CHARGE 95957 Cont IONM out OR, 1:1/ea 15min

CHARGE 95958 Cont IONM out OR, 1:1/ea 15min

CHARGE 95959 Cont IONM out OR, 1:1/ea 15min

CHARGE 95960 Cont IONM out OR, 1:1/ea 15min

CHARGE 95961 Cont IONM out OR, 1:1/ea 15min

CHARGE 95962 Cont IONM out OR, 1:1/ea 15min

CHARGE 95963 Cont IONM out OR, 1:1/ea 15min

CHARGE 95964 Cont IONM out OR, 1:1/ea 15min

CHARGE 95965 Cont IONM out OR, 1:1/ea 15min

CHARGE 95966 Cont IONM out OR, 1:1/ea 15min

CHARGE 95967 Cont IONM out OR, 1:1/ea 15min

CHARGE 95968 Cont IONM out OR, 1:1/ea 15min

CHARGE 95969 Cont IONM out OR, 1:1/ea 15min

CHARGE 95970 Cont IONM out OR, 1:1/ea 15min

CHARGE 95971 Cont IONM out OR, 1:1/ea 15min

CHARGE 95972 Cont IONM out OR, 1:1/ea 15min

CHARGE 95973 Cont IONM out OR, 1:1/ea 15min

CHARGE 95974 Cont IONM out OR, 1:1/ea 15min

CHARGE 95975 Cont IONM out OR, 1:1/ea 15min

CHARGE 95976 Cont IONM out OR, 1:1/ea 15min

CHARGE 95977 Cont IONM out OR, 1:1/ea 15min

CHARGE 95978 Cont IONM out OR, 1:1/ea 15min

CHARGE 95979 Cont IONM out OR, 1:1/ea 15min

CHARGE 95980 Cont IONM out OR, 1:1/ea 15min

CHARGE 95981 Cont IONM out OR, 1:1/ea 15min

CHARGE 95982 Cont IONM out OR, 1:1/ea 15min

CHARGE 95983 Cont IONM out OR, 1:1/ea 15min

CHARGE 95984 Cont IONM out OR, 1:1/ea 15min

CHARGE 95985 Cont IONM out OR, 1:1/ea 15min

CHARGE 95986 Cont IONM out OR, 1:1/ea 15min

CHARGE 95987 Cont IONM out OR, 1:1/ea 15min

CHARGE 95988 Cont IONM out OR, 1:1/ea 15min

CHARGE 95989 Cont IONM out OR, 1:1/ea 15min

CHARGE 95990 Cont IONM out OR, 1:1/ea 15min

CHARGE 95991 Cont IONM out OR, 1:1/ea 15min

CHARGE 95992 Cont IONM out OR, 1:1/ea 15min

CHARGE 95993 Cont IONM out OR, 1:1/ea 15min

CHARGE 95994 Cont IONM out OR, 1:1/ea 15min

CHARGE 95995 Cont IONM out OR, 1:1/ea 15min

CHARGE 95996 Cont IONM out OR, 1:1/ea 15min

CHARGE 95997 Cont IONM out OR, 1:1/ea 15min

CHARGE 95998 Cont IONM out OR, 1:1/ea 15min

CHARGE 95999 Cont IONM out OR, 1:1/ea 15min

CHARGE 96000 Cont IONM out OR, 1:1/ea 15min



Task Edit View Patient Chart Links Notifications Navigation Help

Home Message Center Patient List Schedule Viewer Physician Handoff Discharge Dashboard KeckCare Assist Case Selection Clinical Management Reports Quality Measures My Experience Lexicomp

Tear Off Suspend Charges Exit Calculator Explorer Menu AdHoc Medication Administration PM Conversation Depart Communicate Patient Education Direct Address Book

Age: 50 years Sex: Male MyUSC Chart: No Not Interested - [11/16/... \*\* No Known Allergies \*\* MRN: [REDACTED]  
 DOB: 12/26/1967  
 Patient [Admit Dt: 8/13/2017 13:28:00 PDT Disch Dt: 8/18/2017 11:00:00 PDT] Attending: GMLOS | DRG: 6.3 day(s) | 471 - CER...Blood Trans Acceptable to Pt: Yes

Menu - All Ambulatory Views

Ambulatory Views  
 Inpatient Views  
 Provider View  
 Operative Summaries  
 Physician Handoff  
 SBAR  
 Demographics  
 Results Review  
 View/End O  
 Allergies  
 Orders  
 Medication List  
 Reports/Documents  
 Physician Documenta...  
 Pending Studies  
 MAR Summary  
 eMAR  
 Form Browser  
 Histories

Neurology Pro... Ambulatory W... Ambulatory Su... Discharge Sum... Ambulatory Qu... Anes. Acute Pa... Discharged

Inpatient Discharge Meds as Rx All

Selected visit

Charge	Status	Ordered
CHARGE 95861 Needle EMG, 2 extremity	Completed	09/26/17 13:13
CHARGE G0453 Cont IONM out OR, 1:1/15 min	Completed	09/26/17 13:13
CHARGE 95939 TcMEP, upper and lower limbs	Completed	09/26/17 13:13
CHARGE 95937 Neuromusc junc tst, 1mth/nrv	Completed	09/26/17 13:13
CHARGE 95938 Short-lat SSEP, up&low limbs	Completed	09/26/17 13:13
CHARGE 99232 Sbq IP Care-Mod (25 min)	Completed	08/27/17 22:56
CHARGE 99291 Critical care 1st 30-74 min	Completed	08/27/17 22:55
CHARGE 99232 Sbq IP Care-Mod (25 min)	Completed	08/17/17 10:24
CHARGE 99223 Init IP	Completed	08/16/17

Subsequent Hospital Care  
 Inpatient Consultation  
 Prolonged Services Direct Contact

Order: CHARGE 95861 Needle EMG, 2 extremity  
 Order Details: 26 Professional Component, Closed fracture of cervical spine with spinal cord lesion, Date of Service: 08/15/17  
 Order Comments:  
 Order Date/Time: 09/26/2017 13:13  
 Start Date/Time: 09/26/2017 13:13  
 Status: Completed  
 Ordered by: SHILIAN DO, PARASTOU

CHARGE 92585 Evk poten/resp audio, compn 26  
 Professional Component:  
 Electrocorticogram/intraoperative Monitoring  
 CHARGE 95829 Electrocorticogram at surg 26

IONM in OR, 1:1/ea 15min  
 IONM out OR, 1:1/15 min  
 cort/subcor map/1st hr 26  
 ca/subcorti map, adl hr 26  
 by svc, prol atnd/30min  
 anted Neurostimulator

CHARGE 95970 Analyze neurostim no prog  
 CHARGE 95971 Analyze neurostim simple  
 CHARGE 95974 Anlyz, cmplx cm nrv; prg 1hr  
 CHARGE 95975 Anlyz neuro, cmplx cran nrv/adl 30min  
 CHARGE 95978 Anlyz neurostim brain; prg, 1hr  
 CHARGE 95979 Anlyz neurostim brain; prg, 1hr

Task Edit View Patient Chart Links Notifications Navigation Help

Home Message Center Patient List Schedule Viewer Physician Handoff Discharge Dashboard KeckCare Assist Case Selection Clinical Management Reports Quality Measures My Experience Lexicomp

Tear Off Suspend Charges Exit Calculator Explorer Menu AdHoc Medication Administration PM Conversation Depart Communicate Patient Education Direct Address Book

Age: 50 years Sex: Male MyUSC Chart: No Not Interested - [11/16/... \*\* No Known Allergies \*\* MRN: [REDACTED]  
 DOB: [REDACTED]  
 Patient [Admit Dt: 8/13/2017 13:28:00 PDT Disch Dt: 8/18/2017 11:00:00 PDT] Attending: GMLOS | DRG: 6.3 day(s) | 471 - CER...Blood Trans Acceptable to Pt: Yes

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 Inpatient Views  
 Provider View  
 Operative Summaries  
 Physician Handoff  
 SBAR  
 Demographics  
 Results Review  
 View/End O  
 Allergies  
 Orders  
 Medication List  
 Reports/Documents  
 Physician Documenta...  
 Pending Studies  
 MAR Summary  
 eMAR  
 Form Browser  
 Histories

Neurology Pro... Ambulatory W... Ambulatory Su... Discharge Sum... Ambulatory Qu... Anes. Acute Pa... Discharged

Inpatient Discharge Meds as Rx All

Selected visit

Charge	Status	Ordered
CHARGE 95861 Needle EMG, 2 extremity	Completed	09/26/17 13:13
CHARGE G0453 Cont IONM out OR, 1:1/15 min	Completed	09/26/17 13:13
CHARGE 95939 TcMEP, upper and lower limbs	Completed	09/26/17 13:13
CHARGE 95937 Neuromusc junc tst, 1mth/nrv	Completed	09/26/17 13:13
CHARGE 95938 Short-lat SSEP, up&low limbs	Completed	09/26/17 13:13
CHARGE 99232 Sbq IP Care-Mod (25 min)	Completed	08/27/17 22:56
CHARGE 99291 Critical care 1st 30-74 min	Completed	08/27/17 22:55
CHARGE 99232 Sbq IP Care-Mod (25 min)	Completed	08/17/17 10:24
CHARGE 99223 Init IP	Completed	08/16/17

Subsequent Hospital Care  
 Inpatient Consultation  
 Prolonged Services Direct Contact  
 Inpatient Discharge Service  
 Critical Care Visits  
 Coder Assistance

Order: CHARGE 95939 TcMEP, upper and lower limbs  
 Order Details: 26 Professional Component, Closed fracture of cervical spine with spinal cord lesion, Date of Service: 08/15/17  
 Order Comments:  
 Order Date/Time: 09/26/2017 13:13  
 Start Date/Time: 09/26/2017 13:13  
 Status: Completed  
 Ordered by: SHILIAN DO, PARASTOU

CHARGE 92585 Evk poten/resp audio, compn 26  
 Professional Component:  
 Electrococtogram/intraoperative Monitoring  
 CHARGE 95829 Electrocorticogram at surg 26

CHARGE 95940 Cont IONM in OR, 1:1/ea 15min  
 CHARGE 95941 Contin IONM out OR, 1:1/15 min  
 CHARGE G0453 Cont IONM out OR, 1:1/15 min  
 CHARGE 95961 Func cort/subcor map/1st hr 26

/subcorti map, adl hr 26  
 svc, prol atnd/30min  
 ted Neurostimulator  
 neurostim no prog  
 neurostim simple  
 mpx cm nrv; prg 1hr  
 neuro, cmplx cran nrv/adl

CHARGE 95978 Anlyz neurostim brain; prg, 1hr  
 CHARGE 95979 Anlyz neurostim brain; prg, 1hr



Task Edit View Patient Chart Links Notifications Navigation Help

Home Message Center Patient List Schedule Viewer Physician Handoff Discharge Dashboard KeckCare Assist Case Selection Clinical Management Reports Quality Measures My Experience Lescomp

Tear Off Suspend Charges Edit Calculator Explorer Menu AdHoc Medication Administration PM Conversation Depart Communicate Patient Education

LocUSC-7N: 7207: A Age: 50 years Sex: [REDACTED] No Known Allergies MRN: [REDACTED]  
 Inpatient [Admit Dt: 8/13/2017 13:28:00 PDT Disch Dt: 8/18/2017 11:00:00 PDT] Attending: MyUSC Chart: No Not Interested - (11/16/... Fin#: [REDACTED]  
 GML05 | DRG: 6.3 day(s) | 471 - CER... Blood Trans Acceptable to Pt: Yes

Menu - All Ambulatory Views

Ambulatory Views Inpatient Views Provider View Operative Summaries Physician Handoff SBAR Demographics Results Review View/I and O Allergies Add Orders Add Medication List Add Reports/Documents Add Physician Documenta... Add Pending Studies MAR Summary eMAR Form Browser Histories

Neurology Pro... Ambulatory W... Ambulatory Su... Discharge Sum... Ambulatory Qu... Anes. Acute Pa... Discharged

Inpatient Discharge Meds as Rx All

Selected visit

Charge	Code	Description	Status	Order Date/Time	Start Date/Time	End Date/Time
CHARGE 95861	Needle	Completed	09/26/17 13:13			
CHARGE 95861	EMG, 2 extremity	Completed	09/26/17 13:13			
CHARGE 95861	IONM out OR, 1:1/15 min	Completed	09/26/17 13:13			
CHARGE 95939	TcMEP, upper and lower limbs	Completed	09/26/17 13:13			
CHARGE 95937	Neuromusc junc tst, 1mth/nrv	Completed	09/26/17 13:13			
CHARGE 95938	Short-lat SSEP, up&low limbs	Completed	09/26/17 13:13			
CHARGE 99232	Sbq IP Care-Mod (25 min)	Completed	08/27/17 22:56			
CHARGE 99291	Critical care 1st 30-74 min	Completed	08/27/17 22:55			
CHARGE 99232	Sbq IP Care-Mod (25 min)	Completed	08/17/17 10:24			
CHARGE 99223	Init IP	Completed	08/16/17 10:24			

Order: CHARGE 95937 Neuromusc junc tst, 1mth/nrv  
 Order Details: 26 Professional Component, Closed fracture of cervical spine with spinal cord lesion, Date of Service: 08/15/17  
 Order Comments:  
 Order Date/Time: 09/26/2017 13:13  
 Start Date/Time: 09/26/2017 13:13  
 Status: Completed  
 Ordered by: SHILIAN DO, PARASTOU

Professional Component  
 CHARGE 95962 Cortica/subcorti map, adl hr 26  
 Standby Services  
 CHARGE 99360 Stndby svc, prol atnd/30min  
 Evaluation of Implanted Neurostimulator  
 CHARGE 95970 Analyze neurostim no prog  
 CHARGE 95971 Analyze neurostim simple  
 CHARGE 95974 Anlyz, cmpr crn nrv; prg 1hr  
 CHARGE 95975 Anlyz neuro, cmpr crn nrv; adl 30min  
 CHARGE 95978 Anlyz neurostim brain; prg, 1hr

Task Edit View Patient Chart Links Notifications Navigation Help

Home Message Center Patient List Schedule Viewer Physician Handoff Discharge Dashboard KeckCare Assist Case Selection Clinical Management Reports Quality Measures My Experience Lescomp

Tear Off Suspend Charges Edit Calculator Explorer Menu AdHoc Medication Administration PM Conversation Depart Communicate Patient Education

LocUSC-7N: 7207: A Age: 50 years Sex: Male No Known Allergies MRN: [REDACTED]  
 Inpatient [Admit Dt: 8/13/2017 13:28:00 PDT Disch Dt: 8/18/2017 11:00:00 PDT] Attending: MyUSC Chart: No Not Interested - (11/16/... Fin#: [REDACTED]  
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Neurology Pro... Ambulatory W... Ambulatory Su... Discharge Sum... Ambulatory Qu... Anes. Acute Pa... Discharged

Inpatient Discharge Meds as Rx All

Selected visit

Charge	Code	Description	Status	Order Date/Time	Start Date/Time	End Date/Time
CHARGE 95861	Needle	Completed	09/26/17 13:13			
CHARGE 95861	EMG, 2 extremity	Completed	09/26/17 13:13			
CHARGE 95861	IONM out OR, 1:1/15 min	Completed	09/26/17 13:13			
CHARGE 95939	TcMEP, upper and lower limbs	Completed	09/26/17 13:13			
CHARGE 95937	Neuromusc junc tst, 1mth/nrv	Completed	09/26/17 13:13			
CHARGE 95938	Short-lat SSEP, up&low limbs	Completed	09/26/17 13:13			
CHARGE 99232	Sbq IP Care-Mod (25 min)	Completed	08/27/17 22:56			
CHARGE 99291	Critical care 1st 30-74 min	Completed	08/27/17 22:55			
CHARGE 99232	Sbq IP Care-Mod (25 min)	Completed	08/17/17 10:24			
CHARGE 99223	Init IP	Completed	08/16/17 10:24			

Order: CHARGE 95938 Short-lat SSEP, up&low limbs  
 Order Details: 26 Professional Component, Closed fracture of cervical spine with spinal cord lesion, Date of Service: 08/15/17  
 Order Comments:  
 Order Date/Time: 09/26/2017 13:13  
 Start Date/Time: 09/26/2017 13:13  
 Status: Completed  
 Ordered by: SHILIAN DO, PARASTOU

Subsequent Hospital Care  
 CHARGE 92585 Evk poten/resp audio, cmprh 26  
 Intraoperative Monitoring  
 corticogram at surg 26  
 INM in OR, 1:1/ea 15min  
 IONM out OR, grp/hr  
 INM out OR, 1:1/15 min  
 ort/subcor map/1st hr 26  
 /subcorti map, adl hr 26  
 CHARGE 99360 Stndby svc, prol atnd/30min  
 Evaluation of Implanted Neurostimulator  
 CHARGE 95970 Analyze neurostim no prog  
 CHARGE 95971 Analyze neurostim simple  
 CHARGE 95974 Anlyz, cmpr crn nrv; prg 1hr  
 CHARGE 95975 Anlyz neuro, cmpr crn nrv; adl 30min  
 CHARGE 95978 Anlyz neurostim brain; prg, 1hr

Neurology IP Progress Note

\* Final Report \*

Document Type: Neurology IP Progress Note  
\*Date - Date of Service: August 15, 2017 16:09 PDT  
Document Status: Auth (Verified)  
Document Title: NEURO Surgical Neurophysiology USC  
Author: SHILIAN DO, PARASTOU on August 15, 2017 17:01 PDT  
Authenticated By: SHILIAN DO, PARASTOU on September 26, 2017 13:13 PDT  
Encounter info: [REDACTED], KH-USC, Inpatient, 08/13/2017 - 08/18/2017

**\* Final Report \***

**NEURO Surgical Neurophysiology USC**

Patient: [REDACTED] MRN: [REDACTED] FIN: [REDACTED]  
Age: 49 years Sex: [REDACTED] DOB: [REDACTED]  
Associated Diagnoses: None  
Author: SHILIAN DO, PARASTOU

**General Information**

Date of study: 8/15/2017.  
Referring Physician: LIU MD, JOHN C.

**History of Present Illness**

The patient presents with cervical spine instability.

**Procedure**

**Monitoring Modalities**

Evoked Potentials: somatosensory evoked potentials, upper and lower limbs (95938), transcranial motor evoked potential, upper and lower limbs (95939).  
Electromyography: free run EMG (95861).

**Results Review**

During the Occiput-C5 PSF; C1 laminectomy, the aforementioned modalities were continuously monitored and the surgeon was informed of the baseline(s) listed below.

Somatosensory evoked potentials: bilateral upper extremities adequate, bilateral lower extremities adequate.

Motor evoked potentials: bilateral upper extremities adequate, bilateral lower extremities adequate.

During the procedure, changes were seen in the: motor evoked potentials bilateral upper extremities.

Free running EMG recording was provided. The OR physicians were promptly made aware of any spontaneous discharges suggesting irritation of any of the relevant nerves.

8 hours were spent monitoring.

The surgeons were kept informed of the monitoring status and any significant changes.

**Impression and Plan**

During the procedure, changes were seen in the bilateral upper extremity MEP that were persistent.

**Comments**

Changes seen in the bilateral upper extremity MEP during the procedure suggest that an interruption of this pathway occurred.

**Signature Line**

[REDACTED]

Neurology IP Progress Note  
\* Final Report \*



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JONATHAN CHEN

Electronically Signed On 08/15/17 05:01 PM PDT

---

Jimmy Nguyen

Electronically Signed On 09/28/17 01:13 PM PDT

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PARASTOU SHILIAN, DO

---

ANDRES GONZALEZ, MD

Modified by JONATHAN CHEN On 08/24/17 04:35 PM PDT

Modified by PARASTOU SHILIAN, DO On 09/26/2017 01:13 PM PDT





Operative Report  
\* Final Report \*

Document Type: Operative Report  
\*Date - Date of Service: August 15, 2017 00:00 PDT  
Document Status: Auth (Verified)  
Document Title: Operative/Procedure  
Author: LIU MD, JOHN C on August 18, 2017 13:54 PDT  
Authenticated By: LIU MD, JOHN C on August 21, 2017 08:01 PDT  
Encounter info: [REDACTED] KH-USC, Inpatient, 08/13/2017 - 08/18/2017

**\* Final Report \***

**Operative/Procedure**

DATE OF SERVICE: 08/15/2017

Patient Name: [REDACTED]  
Medical Record #: [REDACTED]  
Date of Birth: 12/26/1967

SURGEON: John Liu, MD

ASSISTANT: Frank Acosta, MD; Dan Donoho, MD

**PREOPERATIVE DIAGNOSIS:**

1. Occipital C1-C2 instability.
2. C1-C2 stenosis with spinal cord compression.

**POSTOPERATIVE DIAGNOSIS:**

1. Occipital C1-C2 instability.
2. C1-C2 stenosis with spinal cord compression.

**OPERATIVE PROCEDURE:**

1. Occipital fusion with Medtronic cervical instrumentation.
2. Posterior fusion with BMP/Mastergraft, occiput, C1, C2, C3, C4, C5.
3. Intraoperative stereotactic navigation.

**INDICATIONS FOR PROCEDURE:** The patient is a 49-year-old with history of Down syndrome, transferred to Keck with increasing quadriparesis after sustaining a fall in May 2017. Previously to that, the patient was walking and had progressive neurological decline. MRI demonstrated what appears to be a C1-C2 instability with evidence of possible occipitocervical instability due to his history of Down syndrome. Severe stenosis with cord changes were noted on the MRI. ADI of approximately 7-8 mm were identified.

Given his worsening symptoms, primary decompression and stabilization was felt to be the best option. Consideration for

Operative Report  
\* Final Report \*

a C1-C2 alone versus occiput to cervical fusion were considered. The final decision will be made intraoperatively.

PROCEDURE: The patient was brought to the operating room. He was placed under anesthesia. Endotracheal tube was passed. He was placed on a Mayfield head holder and turned to the prone position. All pressure points were secured. At this point, the occipitocervical region was prepped and draped and the skin incision was opened. Subperiosteal dissection was carried out to expose the suboccipital region, C1-C2, lateral mass of C3, C4 and C5. The patient with a very stature, very small anatomy was noted. With the exposure in place, O-arm acquisition and images were then acquired, using stereotactic navigation to the initially plan to place C1 and C2 screws. However, immediately it was noted that the stereotactic navigation was not reliable given the tremendous amount of motion that is located in this region. Bilateral C2 nerves were then sacrificed so as to gain access to the joint of C1-C2. This was arthrodesed and a small piece of BMP was packed within the C1-C2 joint itself. We also, before starting the surgery, will also try the position the neck, the cervical spine, in a way as to reduce the C1-C2 subluxation. However, regardless of what position we placed, the C1-C2 did not reduce. This necessitated a wide laminectomy at C1, and it was felt that given the patient's anatomy, the most stable construct would be inclusive of an occipital to cervical fusion. With this in mind, using C-arm fluoroscopy guidance, the C1 bilateral screws were placed under direct visualization, slightly above the facet joints and using the lateral what is approximately 10-15 degrees medial angled and guided by the C-arm fluoroscopy, 2 separate C1 screws were placed with bicortical purchase. We attempted to place the right C2 pars screw, but it broke out superficially and no additional C2 screw was able to be placed on the right side. Attempted a trial of a pedicle, lamina, all was felt to be not able to be placed in appropriate sized screw. Given the small anatomy, stereotactic navigation was felt to be the most accurate way to place additional screws at this time. With a spinous process clamp placed at C2, we then re-spun the O-arm, and using primary stereotactic navigation, was able to guide a C2 pedicle screw on the left side, as well as bilateral C3 lateral mass screws, a right C4 lateral mass, left C4 was left out, and bilateral C5 lateral mass screws. With all screws in position, an occipital plate was also placed and secured with 4 additional screws in the suboccipital region, two of which were then along the midline, where there was ample purchase of the cortical bone. With all the hardware in place, we then proceeded to perform a wide laminectomy at C1 and, removing the ligamentum flavum and completely decompressing the lamina at this point. With the lamina removed, we were able to manipulate the facet joints, and using a reduction technique, be able to pull the C1 body backwards and allow a further reduction of between C1 and C2 to occur. Final tightening and break-offs of the screws that extended from the occiput down to C5 was done. Copious amount of



Operative Report

\* Final Report \*

irrigation was used. Decortication along this entire region, including the occipital region, what is left of C1, C2, C3, C4 and C5, packed with BMP, wrapped with Mastergraft and additional Mastergraft material along this entire region, was performed. Copious amounts of irrigation was used. Vancomycin powder was placed subfascially. A subfascial drain was placed and taken out through a separate stab incision. #1 PDS followed by interrupted subarticular 2-0 and staples were placed on the skin. The patient was then turned to the supine position and awoken from anesthesia in stable condition. All sponge and needle counts were correct at the end of case.

JL/tm

D: 08/18/2017 1:54:28 PM PST

T: 08/18/2017 2:11:46 PM PST

J#: 154901440

**Signature Line**

Electronically Signed On 08/21/17 08:01 AM PDT

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JOHN LIU, MD

# **Exhibit 20**

Neurology IP Progress Note

\* Final Report \*

Document Type: Neurology IP Progress Note  
\*Date - Date of Service: April 03, 2017 19:04 PDT  
Document Status: Auth (Verified)  
Document Title: NEURO Surgical Neurophysiology USC  
Author: MAYORGA, MIRIAN on April 03, 2017 19:11 PDT  
Authenticated By: SHILIAN DO, PARASTOU on April 05, 2017 14:36 PDT  
Encounter info: [REDACTED] KH-USC, Inpatient, 04/03/2017 - 04/13/2017

**\* Final Report \***

**NEURO Surgical Neurophysiology USC**

Patient: [REDACTED] MRN: [REDACTED] FIN: [REDACTED]  
Age: [REDACTED] Sex: [REDACTED] DOB: [REDACTED]  
Associated Diagnoses: None  
Author: MAYORGA, MIRIAN

**General Information**

Date of study: 4/3/2017.  
Referring Physician: HSIEH MD, PATRICK.

**History of Present Illness**

right brachial plexus and neck neurofibroma

**Procedure**

**Monitoring Modalities**

Evoked Potentials: somatosensory evoked potentials, upper and lower limbs (95938), transcranial motor evoked potential, upper and lower limbs (95939).  
Electromyography: train of four (95937), free run EMG (95861).

**Results Review**

During the right neck dissection thoracotomy, right neck mass resection, the aforementioned modalities were continuously monitored and the surgeon was informed of the baseline(s) listed below.

Somatosensory evoked potentials: bilateral upper extremities adequate, bilateral lower extremities adequate.

Motor evoked potentials: bilateral upper extremities adequate, bilateral lower extremities adequate.

During the procedure, potentials remained stable and no adverse electrodiagnostic events were encountered during.

Free running EMG recording was provided. The OR physicians were promptly made aware of any spontaneous discharges suggesting irritation of any of the relevant nerves.

12.05 hours were spent monitoring.

The surgeons were kept informed of the monitoring status and any significant changes.

**Impression and Plan**

No evidence of intraoperative spinal cord impairment was seen.

**Comments**

Bilateral biceps, triceps, deltoid meps absent.

**Signature Line**

Electronically Signed On 04/03/17 07:11 PM PDT

Neurology IP Progress Note  
\* Final Report \*



MIRIAN MAYORGA

Electronically Signed On 04/05/17 02:36 PM PDT

PARASTOU SHILIAN, DO

Modified by PARASTOU SHILIAN, DO On 04/05/17 02:36 PM PDT



Home Message Center Patient List Schedule Viewer Physician Handoff Discharge Dashboard KeckCare Assist Case Selection Clinical Management Reports Quality Measures My Experience Labcomp  
 Tear Off Suspend Charges Exit Calculator Explorer Menu Ad-Hoc Medication Administration PM Conversation Depart Communicate Patient Education Abuse Report Direct Address Book

LocUSC-7N: 7220-B Age: 54 years Sex: Male MyUSC Chart No: Not Interested - [08/20/...]  
 Inpatient [Admit: 04/04/2017 05:15:30 PDT Disch: 04/11/2017 20:09:30 PDT] Attending: [Redacted] MRN: [Redacted]  
 GMI: 05/12/2017 32 days [539] BAC: Blood Trans Acceptable to PT/Vis

Menu: All Ambulatory Views

**Ambulatory Views**

Neurology Pro. x Ambulatory W. x Ambulatory Su. x Discharge Sum. x Ambulatory Qu. x Anes. Acute Pa. x

**Inpatient Discharge Meds as Rx All**

care - Moderate (typically 25 min)	13:22	
99233 - Sbas hospital care - High (typically 35 min) <td>Completed 04/12/17 15:26</td> <td></td>	Completed 04/12/17 15:26	
99253 - I/P consult - Detailed (typically 55 min) <td>Completed 04/12/17 00:28</td> <td>Order: 95940 - Continuous IONM inside OR, 1:1, ea 15 min</td>	Completed 04/12/17 00:28	Order: 95940 - Continuous IONM inside OR, 1:1, ea 15 min
99252 - I/P consult - Expanded (typically 40 min) <td>Completed 04/10/17 11:35</td> <td>Order Details: Neurofibroma of neck, # of Tests: 29, Date of Service: 04/03/17</td>	Completed 04/10/17 11:35	Order Details: Neurofibroma of neck, # of Tests: 29, Date of Service: 04/03/17
95941 - Continuous IONM outside OR, group; per hr <td>Completed 04/05/17 14:37</td> <td>Order Comments: : neustim brain, prg, 1hr neur, cmpx brn/adl 30min uscle Function. EMG &amp; NC</td>	Completed 04/05/17 14:37	Order Comments: : neustim brain, prg, 1hr neur, cmpx brn/adl 30min uscle Function. EMG & NC
95940 - Continuous IONM inside OR, 1:1, ea 15 min <td>Completed 04/05/17 14:37</td> <td>Order Date/Time: 04/05/2017 14:37</td>	Completed 04/05/17 14:37	Order Date/Time: 04/05/2017 14:37
95939 - TcMEP, upper and lower limbs <td>Completed 04/05/17 14:37</td> <td>Start Date/Time: 04/05/2017 14:37</td>	Completed 04/05/17 14:37	Start Date/Time: 04/05/2017 14:37
95861 - Needle EMG, 2 extremity <td>Completed 04/05/17 14:37</td> <td>Status: Completed</td>	Completed 04/05/17 14:37	Status: Completed
95937 - Neuromusc <td>Completed 04/05/17</td> <td>Ordered by: SHILLIAN DO, PARASTOU</td>	Completed 04/05/17	Ordered by: SHILLIAN DO, PARASTOU

CHARGE 95871 Analyze neurostim simple  
 CHARGE 95874 Anlyz,cmpx cm nrv;prg 1hr  
 CHARGE 95875 Anlyz neuro,cmpx cran nrv/adl

Re EMG, 1 extremity 26  
 Re EMG, 2 extremity 26  
 Re EMG, 3 extremity 26

CHARGE 95864 Needle EMG, 4 extremity 26  
 Professional Component  
 CHARGE 95867 Ndi EMG,crania nrv musc,uni 26  
 Professional Component  
 CHARGE 95868 Ndi EMG,crania nrv musc,bil 26  
 Professional Component  
 CHARGE 95870 Ndi EMG limited,1 musc 26  
 Professional Component

Task Edit View Patient Chart Links Notifications Navigation Help

Home Message Center Patient List Schedule Viewer Physician Handoff Discharge Dashboard KeckCare Assist Case Selection Clinical Management Reports Quality Measures My Experience Lexicomp

Tear Off Suspend Charges Exit Calculator Explorer Menu AdHoc Medication Administration PM Conversation Depart Communicate Patient Education Abandon Direct Address Book

LocUSC7N 7220-8 Age: Sex: Male MRN: Fin#

Inpatient [Admit Dt: 4/12/2017 08:15:00 PDT Disch Dt: 4/13/2017 20:00:00 PDT] Attending: MyUSC Chart No Not Interested - 10/8/20... GMILOS - DRG 32 day: 1519 BAC Blood Trans: Acceptable to Pnhes

Menu All Ambulatory Views

100%

Neurology Pro. x Ambulatory W... x Ambulatory Su... x Discharge Sum... x Ambulatory Qu... x Anes. Acute Pa... x

Inpatient Discharge Meds as Rx All

care - Moderate (typically 25 min)	Completed	04/12/17	13:22	Order: 95941 - Continuous IONM outside OR, group; per hr	lyze neurostim simple
99233 - Sbg hospital care - High (typically 35 min)	Completed	04/12/17	15:26	Order Details: Neurofibroma of neck, # of Tests: 5, Date of Service 04/03/17	/z, cmprx on nrv/prg 1hr
99253 - I/P consult - Detailed (typically 55 min)	Completed	04/12/17	00:28	Order Comments:	/z neurostim brainprg, 1hr
99252 - I/P consult - Expanded (typically 40 min)	Completed	04/10/17	11:05	Order Date/Time: 04/05/2017 14:37	/z neur, cmprx bsn/adl 30min
95941 - Continuous IONM outside OR, group; per hr	Completed	04/05/17	14:37	Status: Completed	Muscle Function: EMG & NG
95940 - Continuous IONM inside OR, 1:1, ea 15 min	Completed	04/05/17	14:37	Ordered by: SHILLIAN DO, PARASTOU	Idle EMG, 1 extremity 26
95939 - TcMEP, upper and lower limbs	Completed	04/05/17	14:37		Idle EMG, 2 extremity 26
95861 - Needle EMG, 2 extremity	Completed	04/05/17	14:37		Professional Component

CHARGE 95863 Needle EMG, 3 extremity 26  
Professional Component

CHARGE 95864 Needle EMG, 4 extremity 26  
Professional Component

CHARGE 95867 NDI EMG, crania nrv muscul, uni 26  
Professional Component

CHARGE 95868 NDI EMG, crania nrv muscul, bil 26  
Professional Component

CHARGE 95870 NDI EMG limited 1 muscle 26  
Professional Component

USC Main OR Record  
 \* Final Report \*

Document Type: USC Main OR Record  
 \*Date - Date of Service: April 03, 2017 21:20 PDT  
 Document Status: Modified  
 Document Title: USC Main OR Record  
 Author: Sanchez, Felipe on March 24, 2018 10:38 PDT  
 Encounter info: 678033317, KH-USC, Inpatient, 04/03/2017 - 04/13/2017

**\* Final Report \***

**USC Main OR Record (Verified)**

**USC Main OR Record Summary**

Primary Physician: HSIEH MD, PATRICK  
 Case Number: KH-2017-2619  
 Finalized Date/Time: 03/24/18 10:38:01  
 Pt. Name: [REDACTED]  
 D.O.B./Sex: [REDACTED] Male  
 Med Rec #: [REDACTED]  
 Physician: HSIEH MD, PATRICK  
 Financial #: [REDACTED]  
 Pt. Type: I  
 Room/Bed: 7220/B  
 Admit/Disch: 04/03/17 05:15:00 -  
 04/13/17 20:00:00  
 Institution:

**OR Assessment - MOR**

**Entry 1**

**IDENTIFICATION/VERIFICATION**

Identified	Date of Birth, ID Band, Patient, Procedure, Side and Site, Surgeon, Consent - Discrepancies clarified prior to entry to OR Suite	Verified By	Patient, Physician, Medical Record
Presents With ALLERGY REVIEW	IV		
Allergies Reviewed	Yes		
I have reviewed the Preprocedure or Patient's Assessment Adhoc Form.	Yes		
Reassessment			
Nursing Care Plan			
Patient Outcome:	Met		
Patient relates an increase in psychological and			

USC Main OR Record  
 \* Final Report \*

physiological  
 comfort

Last Modified By: Villanueva RN, Marisol  
 04/03/17 10:42:48

General Comments:  
 Significant Other at bedside. Translator phone used.

Case Attendance - MOR

	Entry 1	Entry 2	Entry 3
Case Attendee	ALVARADO FEL, DAVID E	KIM MD, ANTHONY W	ROFFEY MD, PETER
Role Performed	Anesthesia Resident	First Assistant	Anesthesiologist
Time In (1)	04/03/17 07:41:00	04/03/17 07:41:00	04/03/17 07:41:00
Time Out (1)	04/03/17 12:05:00	04/03/17 11:40:00	04/03/17 11:45:00
Time In (2)	04/03/17 12:35:00	04/03/17 15:24:00	04/03/17 11:00:00
Time Out (2)	04/03/17 14:52:00	04/03/17 18:23:00	04/03/17 11:40:00
Time In (3)	04/03/17 15:47:00		04/03/17 11:56:00
Time Out (3)	04/03/17 19:40:00		04/03/17 11:44:00
Time In (4)			04/03/17 11:05:00
Time Out (4)			04/03/17 11:40:00
Time In (5)			
Time Out (5)			
Relief	No	No	No
Relief Safe Hand-Off	No	No	No
Manufacturer/Vendor			
Manufacturer/Vendor			
Other Name:			
Case Attendee			
Comments			
Last Modified By:	Ouyang RN, Xueqin 04/03/17 20:43:25	Ouyang RN, Xueqin 04/03/17 20:43:25	Ouyang RN, Xueqin 04/03/17 20:46:12
	Entry 4	Entry 5	Entry 6
Case Attendee	HSIEH MD, PATRICK	WONG MD, ALEX K	Villanueva RN,
Marisol			
Role Performed	Provider	Assistant Provider	Circulator
Time In (1)	04/03/17 07:41:00	04/03/17 06:46:00	04/03/17 07:41:00
Time Out (1)	04/03/17 18:09:00	04/03/17 20:30:00	04/03/17 07:30:00
Time In (2)			04/03/17 07:50:00
Time Out (2)			04/03/17 11:56:00
Time In (3)			04/03/17 11:30:00
Time Out (3)			04/03/17 11:37:00
Time In (4)			04/03/17 11:50:00
Time Out (4)			04/03/17 11:08:00
Time In (5)			
Time Out (5)			
Relief	No	No	No
Relief Safe Hand-Off	No	No	No
Manufacturer/Vendor			
Manufacturer/Vendor			
Other Name:			
Case Attendee			
Comments			
Last Modified By:	Villanueva RN, Marisol 04/03/17 17:01:45	Villanueva RN, Marisol 04/03/17 13:36:11	Villanueva RN, 04/03/17 11:40:57
	Entry 7	Entry 8	Entry 9
Case Attendee	Kibler RN, Richard	Aparicio ORT, Rosa	Falletta C T, Carol
Role Performed	Circulator	Scrub	Scrub
Time In (1)	04/03/17 09:25:00	04/03/17 08:30:00	04/03/17 07:41:00
Time Out (1)	04/03/17 09:51:00	04/03/17 08:50:00	04/03/17 07:31:00
Time In (2)		04/03/17 11:50:00	04/03/17 07:49:00



Entry 12

Entry 15

USC Main OR Record  
\* Final Report \*

	Entry 16	Entry 17	Entry 18
<b>Case Attendee</b>	WIGGINS RES, LUKE	SHILIAN DO, PARASTOU	AKOPIAN MI VAHE
<b>Role Performed</b>	Resident	Co Provider	Fellow
<b>Time In (1)</b>	04/03/17 07:41:00	04/03/17 11:09:00	04/03/17 1 :09:00
<b>Time Out (1)</b>	04/03/17 11:41:00	04/03/17 12:05:00	04/03/17 1 :05:00
<b>Time In (2)</b>	04/03/17 15:25:00	04/03/17 12:26:00	
<b>Time Out (2)</b>	04/03/17 20:35:00	04/03/17 13:30:00	
<b>Time In (3)</b>		04/03/17 15:27:00	
<b>Time Out (3)</b>		04/03/17 21:40:00	
<b>Time In (4)</b>			
<b>Time Out (4)</b>			
<b>Time In (5)</b>			
<b>Time Out (5)</b>			
<b>Relief</b>	No	No	No
<b>Relief Safe Hand-Off</b>	No	No	No
<b>Manufacturer/Vendor</b>			
<b>Manufacturer/Vendor</b>			
<b>Other Name:</b>			
<b>Case Attendee</b>			
<b>Comments</b>			
<b>Last Modified By:</b>	Ouyang RN, Xueqin 04/03/17 21:41:26	Ouyang RN, Xueqin 04/03/17 21:41:26	Ouyang RN, Xueqin 04/03/17 2 :41:26
	<b>Entry 19</b>	<b>Entry 20</b>	<b>Entry 21</b>
<b>Case Attendee</b>	BLUE, JULIE	MAYORGA, MIRIAN	JAHANSOUZ D,
<b>Role Performed</b>	Monitor Technician	Monitor Technician	Anesthesic ogist
<b>Time In (1)</b>	04/03/17 13:30:00	04/03/17 14:30:00	04/03/17 1 :51:00
<b>Time Out (1)</b>	04/03/17 14:30:00	04/03/17 15:26:00	04/03/17 1 :55:00
<b>Time In (2)</b>		04/03/17 15:47:00	
<b>Time Out (2)</b>		04/03/17 21:40:00	
<b>Time In (3)</b>			
<b>Time Out (3)</b>			
<b>Time In (4)</b>			
<b>Time Out (4)</b>			
<b>Time In (5)</b>			
<b>Time Out (5)</b>			
<b>Relief</b>	No	No	No
<b>Relief Safe Hand-Off</b>	No	No	No
<b>Manufacturer/Vendor</b>			
<b>Manufacturer/Vendor</b>			
<b>Other Name:</b>			
<b>Case Attendee</b>			
<b>Comments</b>			
<b>Last Modified By:</b>	Ouyang RN, Xueqin 04/03/17 21:41:26	Ouyang RN, Xueqin 04/03/17 21:46:12	Ouyang RN, Xueqin 04/03/17 2 :51:27
	<b>Entry 22</b>	<b>Entry 23</b>	<b>Entry 24</b>
<b>Case Attendee</b>	Sosa, Jesse	MITCHELL RES, KERRY-ANN STEWART	Surginet , N/A
<b>Role Performed</b>	Scrub	Resident	Vendor
<b>Time In (1)</b>	04/03/17 16:00:00	04/03/17 18:10:00	04/03/17 0 :46:00
<b>Time Out (1)</b>	04/03/17 16:28:00	04/03/17 21:40:00	04/03/17 2 :40:00
<b>Time In (2)</b>			
<b>Time Out (2)</b>			
<b>Time In (3)</b>			
<b>Time Out (3)</b>			
<b>Time In (4)</b>			
<b>Time Out (4)</b>			
<b>Time In (5)</b>			
<b>Time Out (5)</b>			
<b>Relief</b>	Yes	No	No
<b>Relief Safe Hand-Off</b>	No	No	No

9

USC Main OR Record  
\* Final Report \*

Manufacturer/Vendor  
Manufacturer/Vendor  
Other Name:  
Case Attendee  
Comments  
Last Modified By:

Ouyang RN, Xueqin  
04/03/17 20:43:25

Ouyang RN, Xueqin  
04/03/17 18:43:21

applied bi logic

MARIANNE F RAGIANIE

Ouyang RN, Xueqin  
04/03/17 2 :43:25

Entry 25

Case Attendee LIM CRNA, DOROTHY

Role Performed CRNA

Time In (1) 04/03/17 19:40:00

Time Out (1) 04/03/17 21:40:00

Time In (2)

Time Out (2)

Time In (3)

Time Out (3)

Time In (4)

Time Out (4)

Time In (5)

Time Out (5)

Relief

No

Relief Safe Hand-Off

No

Manufacturer/Vendor

Manufacturer/Vendor

Other Name:

Case Attendee

Comments

Last Modified By:

Ouyang RN, Xueqin  
04/03/17 20:43:25

Entry 26

ALEXANDER MD, RUSSELL

HASHIMY

Anesthesiologist

04/03/17 19:40:00

04/03/17 21:40:00

Entry 27

Ouyang RN, Xueqin

Circulator

04/03/17 1 :32:00

04/03/17 2 :40:00

No

No

Villanueva RN, Marisol  
04/03/17 10:46:42

Ouyang RN, Xueqin  
04/03/17 2 :43:25

Entry 28

Case Attendee Surginet , N/A

Role Performed Scrub

Time In (1) 04/03/17 17:15:00

Time Out (1) 04/03/17 21:40:00

Time In (2)

Time Out (2)

Time In (3)

Time Out (3)

Time In (4)

Time Out (4)

Time In (5)

Time Out (5)

Relief

No

Relief Safe Hand-Off

No

Manufacturer/Vendor

Manufacturer/Vendor

Other Name:

Case Attendee

Comments

Last Modified By:

Ouyang RN, Xueqin  
04/03/17 20:43:25

Entry 1

Patient

Patient In Room Time 04/03/17 07:41:00

Patient Out Room  
Time

04/03/17 2 :40:00

Anesthesia

Anesthesia Start 04/03/17 07:25:00

Anesthesia IntraOp

04/03/17 0 :42:00

## USC Main OR Record

\* Final Report \*

Time  
Anesthesia Stop Time 04/03/17 22:00:00  
Robot  
Surgery  
Procedure/Surgery 04/03/17 09:35:00  
Start Time:  
Last Modified By: Ouyang RN, Xueqin  
04/03/17 21:41:23

Ready Time

Procedure/Surgery 04/03/17 2 :20:00  
Stop Time:

## OR Safe Hand-Off - MOR

## Entry 1

Hand-Off  
Communication OR RN  
to OR RN

Patient Name &  
Allergies Reviewed,  
Surgical Procedure  
Verified, Site Marked  
(if applicable),  
Planned Anesthesia Type  
Reviewed, Blood  
Products/Consent  
Reviewed, POA Adhoc  
Form Reviewed &  
Complete,  
Catheters/Drains,  
Antibiotics Given,  
Family Waiting/Contact  
Information Documented,  
Surgeon has Spoken with  
Patient/Family

Hand-Off Report OR  
Report Given By:  
Last Modified By:

Villanueva RN, Marisol  
Villanueva RN, Marisol  
04/03/17 10:47:42

Report Given To:

Kibler RN, Richard

## Surgical Safety Checklist - MOR

## Entry 1

Scheduled Procedure

Laminectomy Cervical  
Anterior Discectomy,  
Thoracotomy, Consult  
Wound Closure

Before Skin Incision  
CONFIRM ALL TEAM  
Patient,

Yes, All Team Members

Surgeon, Anesthesia

Date of Birth,

MEMBERS HAVE  
INTRODUCED  
THEMSELVES BY NAME

have Introduced  
Themselves by Name and  
Role

Provider and Nurse  
verbally confirm

Side and Site,  
Procedure, Consent,  
Correct Patient

Position

HAND ROLES

Anticipated  
Critical Events

Surgeon Reviews: What  
are the critical or  
unexpected steps,  
operative duration,  
anticipated blood  
loss?, Correct Implants  
Present, Special  
Equipment Present,  
Anesthesia Team  
Reviews: Are there any  
patient specific  
concerns?, Nursing Team  
Reviews: Has sterility  
(including indicator  
results) been  
confirmed? Are there

USC Main OR Record  
 \* Final Report \*

Antibiotic Prophylaxis  
 Has Antibiotic Prophylaxis been given within the last 60 minutes?  
 First Antibiotic Given  
 Name of Antibiotic Given  
 Antibiotic Given By  
 Other Antibiotic (1st) Free Text  
 Second Antibiotic Given  
 Third Antibiotic Given  
 Is Essential Imaging displayed?  
 Team Members Present  
 Last Modified By:

equipment issues or concerns?  
 Yes  
 Cefazolin  
 ALVARADO FEL, DAVID E  
 2 grams  
 Yes  
 ALVARADO FEL, DAVID E, KIM MD, ANTHONY W, ROFFEY MD, PETER, HSIEH MD, PATRICK, Kibler RN, Richard, Falletta ORT, Carol, Surginet, N/A, BUCHANAN RES, IAN, Bautista, Diego Villanueva RN, Marisol  
 04/03/17 10:49:13

Route of Admin  
 Date/Time Antibiotic Given  
 IV Piggyback  
 04/03/17 08:21:00  
 Time Out Date/Time  
 04/03/17 08:34:00

Foley Catheter?  
 Yes

**Delays - MOR**

Entry 1  
 Delay Reason  
 Last Modified By:  
 General Comments:

Other - See Comments  
 Villanueva RN, Marisol  
 04/03/17 10:50:31  
 Various surgical teams speaking with patient. Translation phone line needed for communication.

**General Case Data - MOR**

Entry 1  
 Case Information  
 OR  
 Specialty  
 Anesthesia Type  
 Surgical Wound Classification Guide  
 Wound Class Group  
 Wound Class  
 Diagnosis  
 Preop Diagnosis  
 Postop Diagnosis  
 Last Modified By:

KH OR 01  
 SN Neurological Surgery  
 General  
 Class 1 - Clean  
 RIGHT NECK AND CHEST MADS NEUROFIBROMA  
 RIGHT NECK AND CHEST MADS NEUROFIBROMA  
 Villanueva RN, Marisol  
 04/03/17 10:55:42

Case Level - DO NOT CHANGE  
 ASA Class  
 Postop Same As Preop

USC Main Case Major  
 3  
 Yes

**Surgical Procedures - MOR**

USC Main OR Record  
\* Final Report \*

	Entry 1	Entry 2	Entry 3
<b>Scheduled Closure</b>	Laminectomy Cervical	Thoracotomy	Consult Wound
<b>Procedure/Pref Card</b>	Anterior Discectomy and Fusion 1 Level		
<b>Primary Procedure</b>	Yes	No	No
<b>Primary Surgeon</b>	HSIEH MD, PATRICK	KIM MD, ANTHONY W	WONG MD, PETER X
<b>Modifiers</b>			
<b>Actual Surgical Procedure</b>	RIGHT RADICAL NECK DISSECTION, THORACOTOMY, RIGHT NECK MASS RESECTION,	STENOTOMY, CHEST WALL RESECTION OF CHEST WALL TUMOR RESECTION	RIGHT RIGHT NECK LATISSIMUS DORSI RATATIONAL FLAP, POSSIBLE FREE FLAP
FROM			AVAILABLE HIGH AND POSSIBLE S LIT THICKENSS KIN GRAFT FROM AVAILABLE SITE
<b>Procedure Start</b>	04/03/17 09:35:00	04/03/17 09:35:00	04/03/17 09:35:00
<b>Procedure Stop</b>	04/03/17 21:20:00	04/03/17 21:20:00	04/03/17 21:20:00
<b>Anesthesia Charge (Maj/Min Only) DO NOT CHANGE</b>	Major	Major	Minor
<b>Surgical Service</b>	SN Neurological Surgery	SN Thoracic	SN Plastic / Reconstructive
<b>Last Modified By:</b>	Ouyang RN, Xueqin 04/03/17 21:41:31	Ouyang RN, Xueqin 04/03/17 21:41:31	Ouyang RN, Xueqin 04/03/17 21:41:31

**Patient Positioning - MOR**

	Entry 1		
<b>Body Position</b>	Supine	<b>Left Arm Position</b>	At Side, Tucked
<b>Right Arm Position</b>	At Side, Tucked	<b>Left Leg Position</b>	Extended
<b>Right Leg Position</b>	Extended	<b>Positioning Device</b>	Donut Headrest, Roho Pillow, Pink Pad, Pillow Under Knees, Safety Strap, SCD 40mmHg Bot Legs
<b>Body Alignment</b>	Yes	<b>Positioning By</b>	ALVARADO, L, DAVID
E, Maintained			KIM MD, ANTHONY W, ROFFEY MD, PETER,
HSIEH			MD, PATRICK,
Villanueva			RN, Marisc,
BUCHANAN			RES, IAN, IGGINS
RES,			LUKE
<b>Positioning Comments</b>	Pink pads to bilateral upper, extremities and heels. Flat sheet used to tuck arms; additional 3 inch silk tape used to secure arms. Safety strap x 3. Anes. and surgical teams in agreement of patient position.		
<b>Patient Positioning Nursing Care Plan</b>			
<b>Patient Outcome:</b>	Met		
<b>Patient is free from signs and</b>			



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USC Main OR Record  
\* Final Report \*

symptoms of injury  
related to  
positioning

Last Modified By: Villanueva RN, Marisol  
04/03/17 12:17:59

General Comments:  
Patient position evaluated every hour and PRN.

**Skin Prep - MOR**

Entry 1		Entry 2	
Prep Area	Neck, chest, upper part of abdomen	Prep Agents	Alcohol, I raprep
Prep Site Dry Prior to Draping?	Yes	Site Prepped By	BUCHANAN F S, IAN
Hair Removal Methods	Clipper	Hair Removal By	WIGGINS RE , LUKE
Skin Prep Nursing Care Plan			
Patient Outcome:	Met		
Patient is free from signs and symptoms of infection			
Last Modified By:	Villanueva RN, Marisol 04/03/17 12:22:00		


**Counts - MOR**

	Entry 1	Entry 2	Entry 3
Counts Process			
Count Type	Initial Pre-Op Count (Baseline)	Relief Count	Relief Count
Performing Counts			
Circulator	Villanueva RN, Marisol	DIAZ RN, NICHOLAS	Villanueva RN,
Marisol			
Performing Counts			
Scrub Performing Counts	Falletta CRT, Carol	Falletta CRT, Carol	Falletta CRT, Carol
Sponges Correct?	Yes	Yes	Yes
Sharps Correct?	Yes	Yes	Yes
Instruments Correct?	Yes	N/A	N/A
Surgeon Notified of Counts	Yes	Yes	Yes
RF Wand Used - No Beeps	n/a	n/a	n/a
All Sponges Accounted For	Yes	Yes	Yes
Sponges			
Sponges Site			
Number of Sponges Packed			
Number of Sponges Counted			
Total # of Sponges Accounted For			
Surgeon Notified of Incorrect Count	n/a	n/a	n/a
X-Ray Taken for Incorrect Count	n/a	n/a	n/a
X-Ray Read By			
Counts Process			
Comments			
Counts Nursing Care			

Operative Reports

\* Final Report \*



Document Type: Operative Reports  
\*Date - Date of Service: April 03, 2017 21:14 PDT  
Document Status: Auth (Verified)  
Document Title: Brief Op Note  
Author: VARTANIAN RES, EMMA on April 03, 2017 21:17 PDT  
Authenticated By: VARTANIAN RES, EMMA on April 03, 2017 21:17 PDT  
Encounter info:  KH-USC, Inpatient, 04/03/2017 - 04/13/2017

**\* Final Report \***

**Preoperative Diagnosis**

R neck neurofibroma

**Postoperative Diagnosis**

R neck neurofibroma

**Operation**

rotational pectoralis major myocutaneous flap

**Surgeon(s)**

Wong

**Assistant**

Mitchell

Vartanian

**Anesthesia**

GETA

**Estimated Blood Loss**

50 cc

**Urine Output**

800 cc

**Specimen(s)**

none

**Complications**

none apparent

**Technique**

see operative report

**Signature Line**

Electronically Signed On 04/03/17 09:17 PM PDT

EMMA VARTANIAN

Modified by EMMA VARTANIAN On 04/03/17 09:17 PM PDT





# **Exhibit 21**

Faculty Compensation Plan\_Neurology

# **Exhibit 22**

Panagiotou Shilian, D.O.  
Department of Neurology  
Keck School of Medicine of USC  
Faculty Compensation Plan

Description	Account	Object Code	Budget 2013		Actual		Budget 2014		Actual		Budget 2015		Actual		Budget 2016		Projected Actual	
			Annual Amount	% effort	Annual Amount	% effort	Annual Amount	% effort	Annual Amount	% effort	Annual Amount	% effort	Annual Amount	% effort	Annual Amount	% effort	Annual Amount	% effort
<b>Fixed Annual Salary (X + Y Components)</b>																		
Academic Salary (X: MSOA)			\$150,000	100%	\$150,000	100%	\$150,000	100%	\$150,000	100%	\$150,000	79%	\$158,185	79%	\$151,680	76%	\$151,680	76%
Clinical Practice (X: Neurology)			\$0	0%	\$0	0%	\$0	0%	\$0	0%	\$50,000	26%	\$41,815	21%	\$48,320	24%	\$48,320	24%
<b>Total Fixed Annual Salary (X + Y)</b>			<b>\$150,000</b>	<b>100%</b>	<b>\$150,000</b>	<b>100%</b>	<b>\$150,000</b>	<b>100%</b>	<b>\$150,000</b>	<b>100%</b>	<b>\$200,000</b>	<b>100%</b>	<b>\$200,000</b>	<b>100%</b>	<b>\$200,000</b>	<b>100%</b>	<b>\$200,000</b>	<b>100%</b>
<b>At-Risk Incentive and Productivity Compensation (Z Components)</b>																		
Incentive Compensation (Z)			\$124,200		\$136,302		\$143,785		\$162,371		\$93,785		\$87,572		\$107,500		\$106,060	
Academic, Clinical and Research Productivity Bonus Compensation (Z)			\$0		\$0		\$0		\$0		\$0		\$0		\$0		\$0	
<b>Total At-Risk Incentive and Productivity Bonus Compensation (Z)</b>			<b>\$124,200</b>		<b>\$136,302</b>		<b>\$143,785</b>		<b>\$162,371</b>		<b>\$93,785</b>		<b>\$87,572</b>		<b>\$107,500</b>		<b>\$106,060</b>	
<b>Clinical Service Overhead</b>			<b>\$0</b>		<b>\$0</b>		<b>\$0</b>		<b>\$51,000</b>		<b>\$90,188</b>		<b>\$81,600</b>		<b>\$95,472</b>		<b>\$104,040</b>	
<b>Total Faculty Compensation Plan</b>			<b>\$274,200</b>		<b>\$286,302</b>		<b>\$293,785</b>		<b>\$313,371</b>		<b>\$383,953</b>		<b>\$369,172</b>		<b>\$402,972</b>		<b>\$410,100</b>	
			N Net Collection Credit		N Net Collection Credit		N Net Collection Credit		N Net Collection Credit		N Net Collection Credit		N Net Collection Credit		N Net Collection Credit		N Net Collection Credit	
			3,591.2		5,617.9		4,305.0		7,741.1		8,200.0		6,556.7		8,200.0		6,556.7	
			\$239,604		\$276,818		\$239,641		\$312,719		\$383,910		\$378,723		\$383,910		\$378,723	
			\$82,800		\$81,962		\$86,856		\$147,739		\$95,856		\$127,480		\$127,480		\$170,425	
			\$124,200		\$136,302		\$143,785		\$162,371		\$143,785		\$129,387		\$155,820		\$208,298	
			\$0		\$0		\$0		\$0		\$50,000		\$41,815		\$48,320		\$48,320	
			<b>\$124,200</b>		<b>\$136,302</b>		<b>\$143,785</b>		<b>\$162,371</b>		<b>\$93,785</b>		<b>\$87,572</b>		<b>\$107,500</b>		<b>\$106,060</b>	
			40%		40%		40%		40%		40%		40%		40%		40%	

Net Collections 762,517  
Incentive Rate 55%  
Net Collection Credit 418,819  
Less: Clinical Fixed Salary 286,714  
Total Incentive 212,130

# **Exhibit 2**

Group	USC CARE MEDICAL GROUP INC (3)
Department	NEUROLOGY (5)
Division	INTRAOPERATIVE MONITORING (29)
Date of Posting,Fiscal Month Name	(Multiple Items) <----July - Feb

Procedure Code	Column Labels FY 2016		FY 2017	
	Procedure Units	Procedure Units	Diff in PUnits	% Diff in PUnits
<b>99201-99499 Evaluation and Management</b>	<b>8</b>	<b>8</b>		<b>0.00%</b>
<b>99201-99205 Outpatient Visit - New</b>	<b>2</b>	<b>2</b>		<b>0.00%</b>
99204 - OFFICE OUTPT NEW 45 MIN		2	2	
99205 - OFFICE OUTPT NEW 60 MIN	2		(2)	
<b>99211-99215 Outpatient Visit - Established</b>	<b>2</b>		<b>(2)</b>	
99214 - OFFICE OUTPT EST 25 MIN	2		(2)	
<b>99360-99360 Standby Services</b>	<b>4</b>	<b>6</b>	<b>2</b>	<b>50.00%</b>
99360 - PHYS STANDBY SVC PROLNG PHYS ATTN EA 30 MIN	4	6	2	50 00%
<b>61000-64999 Nervous System</b>				
<b>69990-69990 Operating Microscope</b>				
<b>90281-99607 Medicine</b>	<b>5,570</b>	<b>4,658</b>	<b>(912)</b>	<b>-16.37%</b>
<b>92550-92596 Hearing and Speech Tests</b>	<b>67</b>	<b>58</b>	<b>(9)</b>	<b>-13.43%</b>
92585 - AEP ERAAND TSTG CNS COMPRE	67	58	(9)	-13.43%
<b>95812-95830 Evaluation of Brain Activity by Electroencephalogram</b>	<b>46</b>	<b>47</b>	<b>1</b>	<b>2.17%</b>
95813 - EEG EXTND MNTR GRTR 1 HR	3		(3)	
95816 - EEG W REC AWAKEANDDROWSY	1		(1)	
95819 - EEG W REC AWAKEANDASLEEP	1		(1)	
95822 - EEG REC COMA SLEEP ONLY	41	46	5	12 20%
95829 - ELECTROCORTICOGRAM SURG SPX		1		
<b>95860-95920 Evaluation of Nerve and Muscle Function: Electromyography/Nerve Conduction Studies</b>	<b>700</b>	<b>752</b>	<b>52</b>	<b>7.43%</b>
95860 - NDL EMG 1 XTR PLUS-RELATED PARASPI AREAS	1		(1)	
95861 - NDL EMG 2 XTR PLUS-RELATED PARASPI AREAS	427	496	69	16.16%
95864 - NDL EMG 4 XTR PLUS-RELATED PARASPI AREAS	1		(1)	
95867 - NDL EMG CRNL NRV SUPPLIED MUSC UNI	184	164	(20)	-10 87%
95868 - NDL EMG CRNL NRV SUPPLIED MUSC BI	84	91	7	8 33%
95870 - NDL EMG LMTD STD MUSC 1 XTR NON-LIMB UNI BI	1	1		0 00%
95887 - NEEDLE EMG NONEXTREMTY MSCLES W/NERVE CONDUCTION	1		(1)	
95907 - MOTOR &/SENS 1-2 NRV CNDJ PRECONF ELTRODE LIMB	1		(1)	
<b>95925-95943 Neurotransmission Studies</b>	<b>4,701</b>	<b>3,748</b>	<b>(953)</b>	<b>-20.27%</b>
95925 - SHORT-LATENCY SOMATOSENS EP STD UPR LIMBS	2	5	3	150 00%
95926 - SHORT-LATENCY SOMATOSENS EP STD LWR LIMBS	1		(1)	
95928 - CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ UPR LIMBS	1	1		0 00%
95929 - CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ LWR LIMBS	2		(2)	
95930 - VISUAL EP TSTG CNS CHECKERBOARD FLASH	1		(1)	
95937 - NEUROMUSCULAR JUNCT TSTG EA NRV ANY 1 METH	174	172	(2)	-1.15%
95938 - SHORT-LATENCY SOMATOSENS EP STD UPR & LOW LIMBS	591	657	66	11.17%
95939 - CTR MOTR EP STD TRANSCRNL MOTR STIM UPR&LOW LIMB	550	643	93	16 91%
95940 - IONM 1 ON 1 IN OR W/ATTENDANCE EACH 15 MINUTES	1,923	845	(1,078)	-56 06%
95941 - IONM REMOTE/NEARBY MORE THAN 1 PATIENT IN OR PER HOUR	1,456	1,425	(31)	-2.13%
<b>95950-95962 Electroencephalography For Seizure Monitoring/Intraoperative Use</b>	<b>38</b>	<b>32</b>	<b>(6)</b>	<b>-15.79%</b>
<b>95970-95982 Evaluation of Implanted Neurostimulator</b>	<b>18</b>	<b>21</b>	<b>3</b>	<b>16.67%</b>
<b>G0008-G9156 Procedures/Professional Services (Temporary)</b>	<b>4,253</b>	<b>5,488</b>	<b>1,235</b>	<b>29.04%</b>
<b>G0127-G3001 Untitled section</b>	<b>4,253</b>	<b>5,488</b>	<b>1,235</b>	<b>29.04%</b>
G0453 - CONT INTRAOP NEURO MONITOR	4,253	5,488	1,235	29 04%
<b>Grand Total</b>	<b>9,831</b>	<b>10,154</b>	<b>323</b>	<b>3.29%</b>

Group	USC CARE MEDICAL GROUP INC (3)
Division	INTRAOPERATIVE MONITORING (29)
Department	NEUROLOGY (5) <----July - Feb
Date of Posting.Fiscal Month Name	(Multiple Items)

Procedure Code	Column Labels FY 2016		FY 2017	
	Charge Amount	Charge Amount	Diff in Chgs	% Diff in Chgs
<b>99201-99499 Evaluation and Management</b>	<b>\$2,060</b>	<b>\$1,680</b>	<b>(\$380)</b>	<b>-18.45%</b>
<b>99201-99205 Outpatient Visit - New</b>	<b>\$960</b>	<b>\$780</b>	<b>(\$180)</b>	<b>-18.75%</b>
99204 - OFFICE OUTPT NEW 45 MIN		\$780	\$780	
99205 - OFFICE OUTPT NEW 60 MIN	\$960		(\$960)	
<b>99211-99215 Outpatient Visit - Established</b>	<b>\$500</b>		<b>(\$500)</b>	
99214 - OFFICE OUTPT EST 25 MIN	\$500		(\$500)	
<b>99221-99233 Inpatient Hospital Visits: Initial and Subsequent</b>	<b>\$</b>		<b>\$</b>	
<b>99238-99239 Inpatient Hospital Discharge Services</b>	<b>\$</b>		<b>\$</b>	
99238 - HOSP DSCHRG D MGMT 30 MIN LESSTHN	\$		\$	
<b>99360-99360 Standby Services</b>	<b>\$600</b>	<b>\$900</b>	<b>\$300</b>	<b>50.00%</b>
99360 - PHYS STANDBY SVC PROLNG PHYS ATTN EA 30 MIN	\$600	\$900	\$300	50.00%
<b>61000-64999 Nervous System</b>	<b>\$</b>		<b>\$</b>	
<b>69990-69990 Operating Microscope</b>	<b>\$</b>		<b>\$</b>	
<b>90281-99607 Medicine</b>	<b>\$953,870</b>	<b>\$867,765</b>	<b>(\$86,105)</b>	<b>-9.03%</b>
<b>92550-92596 Hearing and Speech Tests</b>	<b>\$17,420</b>	<b>\$15,080</b>	<b>(\$2,340)</b>	<b>-13.43%</b>
92585 - AEP ERAAND TSTG CNS COMPRE	\$17,420	\$15,080	(\$2,340)	-13.43%
<b>95812-95830 Evaluation of Brain Activity by Electroencephalogram</b>	<b>\$11,000</b>	<b>\$11,890</b>	<b>\$890</b>	<b>8.09%</b>
95813 - EEG EXTND MNTR GRTR 1 HR	\$1,110		(\$1,110)	
95816 - EEG W REC AWAKEANDDROWSY	\$230		(\$230)	
95819 - EEG W REC AWAKEANDASLEEP	\$230	\$	(\$230)	-100.00%
95822 - EEG REC COMA SLEEP ONLY	\$9,430	\$10,580	\$1,150	12.20%
95829 - ELECTROCORTICOGRAM SURG SPX		\$1,310	\$1,310	
<b>95860-95920 Evaluation of Nerve and Muscle Function: Electromyography/Nerve Conduction Studi</b>	<b>\$175,940</b>	<b>\$194,470</b>	<b>\$18,530</b>	<b>10.53%</b>
95860 - NDL EMG 1 XTR PLUS-RELATED PARASPI AREAS	\$190	\$	(\$190)	-100.00%
95861 - NDL EMG 2 XTR PLUS-RELATED PARASPI AREAS	\$128,100	\$148,800	\$20,700	16.16%
95864 - NDL EMG 4 XTR PLUS-RELATED PARASPI AREAS	\$380		(\$380)	
95867 - NDL EMG CRNL NRV SUPPLIED MUSC UNI	\$27,600	\$24,600	(\$3,000)	-10.87%
95868 - NDL EMG CRNL NRV SUPPLIED MUSC BI	\$19,320	\$20,930	\$1,610	8.33%
95870 - NDL EMG LMTD STD MUSC 1 XTR NON-LIMB UNI BI	\$80	\$140	\$60	75.00%
95886 - NEEDLE EMG EA EXTREMTY W/PARASPINL AREA COMPLETE		\$	\$	
95887 - NEEDLE EMG NONEXTREMTY MSCLES W/NERVE CONDUCTION	\$90	\$	(\$90)	-100.00%
95907 - MOTOR &/SENS 1-2 NRV CNDJ PRECONF ELTRODE LIMB	\$180	\$	(\$180)	-100.00%
95912 - MOTOR &/SENS 11-12 NRV CNDJ PRECONF ELTRODE LIMB		\$	\$	
95920 - INTRAOP NEUROPHYSIOLOGY TSTG PR HR	\$	\$	\$	
<b>95925-95943 Neurotransmission Studies</b>	<b>\$709,550</b>	<b>\$614,525</b>	<b>(\$95,025)</b>	<b>-13.39%</b>
95925 - SHORT-LATENCY SOMATOSENS EP STD UPR LIMBS	\$400	\$1,000	\$600	150.00%
95926 - SHORT-LATENCY SOMATOSENS EP STD LWR LIMBS	\$200	\$	(\$200)	-100.00%
95928 - CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ UPR LIMBS	\$480	\$480	\$	0.00%
95929 - CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ LWR LIMBS	\$960	\$	(\$960)	-100.00%
95930 - VISUAL EP TSTG CNS CHECKERBOARD FLASH	\$120		(\$120)	
95937 - NEUROMUSCULAR JUNCT TSTG EA NRV ANY 1 METH	\$38,280	\$37,840	(\$440)	-1.15%
95938 - SHORT-LATENCY SOMATOSENS EP STD UPR & LOW LIMBS	\$59,100	\$65,700	\$6,600	11.17%
95939 - CTR MOTR EP STD TRANSCRNL MOTR STIM UPR&LOW LIMB	\$143,000	\$167,180	\$24,180	16.91%
95940 - IONM 1 ON 1 IN OR W/ATTENDANCE EACH 15 MINUTES	\$211,530	\$92,950	(\$118,580)	-56.06%
95941 - IONM REMOTE/NEARBY MORE THAN 1 PATIENT IN OR PER HOUR	\$255,480	\$249,375	(\$6,105)	-2.39%
<b>95950-95962 Electroencephalography For Seizure Monitoring/Intraoperative Use</b>	<b>\$26,360</b>	<b>\$16,090</b>	<b>(\$10,270)</b>	<b>-38.96%</b>
95951 - MNTR F LOCLZJ CERE SEIZ FOC CABLE RADIO EEG VID	\$14,000		(\$14,000)	
95955 - EEG NONICRA SURG		\$160	\$160	
95961 - FUNCJAL CORTANDSUBCORT MAPG ELTRDS 1 HR PHYS ATTN	\$9,180	\$12,750	\$3,570	38.89%
95962 - FUNCJAL CORTANDSUBCORT MAPG ELTRDS EA HR PHYS ATTN	\$3,180	\$3,180	\$	0.00%
<b>95970-95982 Evaluation of Implanted Neurostimulator</b>	<b>\$13,600</b>	<b>\$15,710</b>	<b>\$2,110</b>	<b>15.51%</b>
95978 - ELEC ALYS NSTIM PLS GEN CPLX DP BRN 1ST HR	\$12,040	\$13,760	\$1,720	14.29%
95979 - ELEC ALYS NSTIM PLS GEN CPLX DP BRN EA 30 MIN	\$1,560	\$1,950	\$390	25.00%
<b>95992-95999 Other and Unlisted Neurological Procedures</b>	<b>\$</b>		<b>\$</b>	
95999 - UNLIS NEUROLOGICAL NEUROMUSCULAR DX PX	\$		\$	
<b>G0008-G9156 Procedures/Professional Services (Temporary)</b>	<b>\$382,770</b>	<b>\$493,920</b>	<b>\$111,150</b>	<b>29.04%</b>
<b>G0127-G3001 Untitled section</b>	<b>\$382,770</b>	<b>\$493,920</b>	<b>\$111,150</b>	<b>29.04%</b>
G0453 - CONT INTRAOP NEURO MONITOR	\$382,770	\$493,920	\$111,150	29.04%
<b>Grand Total</b>	<b>\$1,338,700</b>	<b>\$1,363,365</b>	<b>\$24,665</b>	<b>1.84%</b>

Group	USC CARE MEDICAL GROUP INC (3)
Department	NEUROLOGY (5)
Date of Posting.Fiscal Month Name	(Multiple Items) <----July - Feb
Division	INTRAOPERATIVE MONITORING (29)

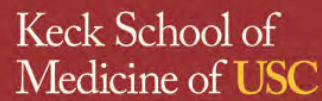
Procedure Code	Column Labels			
	FY 2016		FY 2017	
	Net Collection	Net Collection	Difference Net	% Difference
<b>- Invoice Payment</b>	<b>\$2,474</b>	<b>\$5,407</b>	<b>\$2,933</b>	<b>118.56%</b>
Unknown - Unknown	\$	(\$1,490)	(\$1,490)	
<b>99201-99499 Evaluation and Management</b>	<b>\$1,099</b>	<b>\$147</b>	<b>(\$952)</b>	<b>-86.65%</b>
<b>99201-99205 Outpatient Visit - New</b>	<b>\$494</b>	<b>\$147</b>	<b>(\$347)</b>	<b>-70.29%</b>
99204 - OFFICE OUTPT NEW 45 MIN		\$147	\$147	
99205 - OFFICE OUTPT NEW 60 MIN	\$494		(\$494)	
<b>99211-99215 Outpatient Visit - Established</b>	<b>\$178</b>		<b>(\$178)</b>	
99214 - OFFICE OUTPT EST 25 MIN	\$178		(\$178)	
<b>99221-99233 Inpatient Hospital Visits: Initial and Subsequent</b>	<b>\$215</b>		<b>(\$215)</b>	
99222 - 1ST HOSP CARE PR D 50 MIN	\$123		(\$123)	
99233 - SBSQ HOSP CARE PR D 35 MIN	\$92		(\$92)	
<b>99238-99239 Inpatient Hospital Discharge Services</b>	<b>\$62</b>		<b>(\$62)</b>	
99238 - HOSP DSCHRG D MGMT 30 MIN LESSTHN	\$62		(\$62)	
<b>99360-99360 Standby Services</b>	<b>\$150</b>	<b>\$</b>	<b>(\$150)</b>	<b>-100.00%</b>
99360 - PHYS STANDBY SVC PROLNG PHYS ATTN EA 30 MIN	\$150	\$	(\$150)	-100.00%
<b>61000-64999 Nervous System</b>	<b>\$</b>		<b>\$</b>	
<b>69990-69990 Operating Microscope</b>	<b>\$</b>		<b>\$</b>	
<b>90281-99607 Medicine</b>	<b>\$413,153</b>	<b>\$369,482</b>	<b>(\$43,671)</b>	<b>-10.57%</b>
<b>92550-92596 Hearing and Speech Tests</b>	<b>\$3,481</b>	<b>\$3,028</b>	<b>(\$452)</b>	<b>-13.00%</b>
92585 - AEP ERAAND TSTG CNS COMPRE	\$3,481	\$3,028	(\$452)	-13.00%
<b>95812-95830 Evaluation of Brain Activity by Electroencephalogram</b>	<b>\$3,299</b>	<b>\$3,488</b>	<b>\$189</b>	<b>5.73%</b>
95813 - EEG EXTND MNTR GRTR 1 HR	\$337		(\$337)	
95816 - EEG W REC AWAKEANDDROWSY	\$77		(\$77)	
95819 - EEG W REC AWAKEANDASLEEP	(\$9)	\$150	\$159	-1842.16%
95822 - EEG REC COMA SLEEP ONLY	\$2,894	\$3,338	\$445	15.36%
95829 - ELECTROCORTICOGRAM SURG SPX		\$	\$	
<b>95860-95920 Evaluation of Nerve and Muscle Function: Electromyography/Nerve Conduction Studies</b>	<b>\$68,444</b>	<b>\$64,518</b>	<b>(\$3,925)</b>	<b>-5.74%</b>
95860 - NDL EMG 1 XTR PLUS-RELATED PARASPI AREAS	\$7	\$48	\$41	562.30%
95861 - NDL EMG 2 XTR PLUS-RELATED PARASPI AREAS	\$45,371	\$47,392	\$2,021	4.46%
95864 - NDL EMG 4 XTR PLUS-RELATED PARASPI AREAS	\$94		(\$94)	
95867 - NDL EMG CRNL NRV SUPPLIED MUSC UNI	\$11,011	\$8,746	(\$2,265)	-20.57%
95868 - NDL EMG CRNL NRV SUPPLIED MUSC BI	\$7,707	\$7,541	(\$166)	-2.15%
95870 - NDL EMG LMTD STD MUSC 1 XTR NON-LIMB UNI BI	\$22	\$140	\$117	523.83%
95886 - NEEDLE EMG EA EXTREMTY W/PARASPINL AREA COMPLETE		\$50	\$50	
95887 - NEEDLE EMG NONEXTREMTY MSCLES W/NERVE CONDUCTION	\$107	\$69	(\$39)	-36.10%
95907 - MOTOR &/SENS 1-2 NRV CNDJ PRECONF ELTRODE LIMB	\$150	\$97	(\$53)	-35.55%
95920 - INTRAOP NEUROPHYSIOLOGY TSTG PR HR	\$3,973	\$263	(\$3,710)	-93.38%
<b>95925-95943 Neurotransmission Studies</b>	<b>\$319,845</b>	<b>\$290,030</b>	<b>(\$29,815)</b>	<b>-9.32%</b>
95925 - SHORT-LATENCY SOMATOSENS EP STD UPR LIMBS	\$242	\$233	(\$9)	-3.55%
95926 - SHORT-LATENCY SOMATOSENS EP STD LWR LIMBS	\$58	\$27	(\$31)	-53.23%
95928 - CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ UPR LIMBS	\$310	\$159	(\$151)	-48.66%
95929 - CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ LWR LIMBS	\$84	\$10	(\$74)	-87.79%
95930 - VISUAL EP TSTG CNS CHECKERBOARD FLASH	\$55		(\$55)	
95937 - NEUROMUSCULAR JUNCT TSTG EA NRV ANY 1 METH	\$8,512	\$5,910	(\$2,602)	-30.57%
95938 - SHORT-LATENCY SOMATOSENS EP STD UPR & LOW LIMBS	\$31,491	\$34,378	\$2,887	9.17%
95939 - CTR MOTR EP STD TRANSCRNL MOTR STIM UPR&LOW LIMB	\$79,282	\$85,953	\$6,671	8.41%
95940 - IONM 1 ON 1 IN OR W/ATTENDANCE EACH 15 MINUTES	\$74,234	\$43,477	(\$30,757)	-41.43%
95941 - IONM REMOTE/NEARBY MORE THAN 1 PATIENT IN OR PER HOUR	\$125,577	\$119,883	(\$5,694)	-4.53%
<b>95950-95962 Electroencephalography For Seizure Monitoring/Intraoperative Use</b>	<b>\$12,717</b>	<b>\$5,291</b>	<b>(\$7,426)</b>	<b>-58.39%</b>
95951 - MNTR F LOCLZJ CERE SEIZ FOC CABLE RADIO EEG VID	\$6,363		(\$6,363)	
95955 - EEG NONICRA SURG		\$	\$	
95961 - FUNCIAL CORTANDSUBCORT MAPG ELTRDS 1 HR PHYS ATTN	\$4,615	\$3,964	(\$651)	-14.12%
95962 - FUNCIAL CORTANDSUBCORT MAPG ELTRDS EA HR PHYS ATTN	\$1,738	\$1,327	(\$411)	-23.65%
<b>95970-95982 Evaluation of Implanted Neurostimulator</b>	<b>\$5,201</b>	<b>\$3,126</b>	<b>(\$2,075)</b>	<b>-39.90%</b>
95978 - ELEC ALYS NSTIM PLS GEN CPLX DP BRN 1ST HR	\$4,444	\$3,126	(\$1,317)	-29.65%
95979 - ELEC ALYS NSTIM PLS GEN CPLX DP BRN EA 30 MIN	\$758	\$	(\$758)	-100.00%
<b>95992-95999 Other and Unlisted Neurological Procedures</b>	<b>\$166</b>		<b>(\$166)</b>	
95999 - UNLIS NEUROLOGICAL NEUROMUSCULAR DX PX	\$166		(\$166)	
<b>G0008-G9156 Procedures/Professional Services (Temporary)</b>	<b>\$132,332</b>	<b>\$191,124</b>	<b>\$58,792</b>	<b>44.43%</b>
<b>G0127-G3001 Untitled section</b>	<b>\$132,332</b>	<b>\$191,124</b>	<b>\$58,792</b>	<b>44.43%</b>
<b>Grand Total</b>	<b>\$549,058</b>	<b>\$564,670</b>	<b>\$15,612</b>	<b>2.84%</b>



Group	USC CARE MEDICAL GROUP INC (3)
Department	NEUROLOGY (5)
Date of Posting, Fiscal Month Name	(Multiple Items) <----July - Feb
Division	INTRAOPERATIVE MONITORING (29)

Procedure Code	Column Labels			
	FY 2016 Work RVU	Work RVU	FY 2017 Diff in wRVU	% Diff in
- Invoice Payment	0.00	0.00	0.00	
Unknown	0.00	0.00	0.00	
<b>99201-99499 Evaluation and Management</b>	<b>14.81</b>	<b>12.63</b>	<b>(2.18)</b>	<b>-14.74%</b>
99201-99205 Outpatient Visit - New	6.64	5.09	(1.55)	-23.34%
99204 - OFFICE OUTPT NEW 45 MIN		5.09	5.09	
99205 - OFFICE OUTPT NEW 60 MIN	6.64		(6.64)	
<b>99211-99215 Outpatient Visit - Established</b>	<b>3.14</b>		<b>(3.14)</b>	
99214 - OFFICE OUTPT EST 25 MIN	3.14		(3.14)	
<b>99221-99233 Inpatient Hospital Visits: Initial and Subsequent</b>	<b>0.00</b>		<b>0.00</b>	
99222 - 1ST HOSP CARE PR D 50 MIN	0.00		0.00	
99233 - SBSQ HOSP CARE PR D 35 MIN	0.00		0.00	
<b>99238-99239 Inpatient Hospital Discharge Services</b>	<b>0.00</b>		<b>0.00</b>	
99238 - HOSP DSCHRG D MGMT 30 MIN LESSTHN	0.00		0.00	
<b>99360-99360 Standby Services</b>	<b>5.03</b>	<b>7.54</b>	<b>2.51</b>	<b>49.82%</b>
<b>69990-69990 Operating Microscope</b>	<b>0.00</b>		<b>0.00</b>	
<b>90281-99607 Medicine</b>	<b>7,638.59</b>	<b>7,102.71</b>	<b>(535.88)</b>	<b>-7.02%</b>
92550-92596 Hearing and Speech Tests	35.07	30.36	(4.71)	-13.43%
92585 - AEP ERAAND TSTG CNS COMPRE	35.07	30.36	(4.71)	-13.43%
<b>95812-95830 Evaluation of Brain Activity by Electroencephalogram</b>	<b>54.06</b>	<b>58.51</b>	<b>4.45</b>	<b>8.23%</b>
95813 - EEG EXTND MNTR GRTR 1 HR	5.43		(5.43)	
95816 - EEG W REC AWAKEANDDROWSY	1.13		(1.13)	
95819 - EEG W REC AWAKEANDASLEEP	1.13	0.00	(1.13)	-100.00%
95822 - EEG REC COMA SLEEP ONLY	46.36	52.01	5.65	12.20%
95829 - ELECTROCORTICOGRAM SURG SPX		6.49	6.49	
<b>95860-95920 Evaluation of Nerve and Muscle Function: Electromyography/Nerve Conduction Studi</b>	<b>949.72</b>	<b>1,048.20</b>	<b>98.48</b>	<b>10.37%</b>
95860 - NDL EMG 1 XTR PLUS-RELATED PARASPI AREAS	1.01	0.00	(1.01)	-100.00%
95861 - NDL EMG 2 XTR PLUS-RELATED PARASPI AREAS	688.49	799.74	111.25	16.16%
95864 - NDL EMG 4 XTR PLUS-RELATED PARASPI AREAS	2.08		(2.08)	
95867 - NDL EMG CRNL NRV SUPPLIED MUSC UNI	152.19	135.65	(16.54)	-10.87%
95868 - NDL EMG CRNL NRV SUPPLIED MUSC BI	103.78	112.43	8.65	8.33%
95870 - NDL EMG LMTD STD MUSC 1 XTR NON-LIMB UNI BI	0.39	0.39	0.00	0.00%
95886 - NEEDLE EMG EA EXTREMTY W/PARASPINL AREA COMPLETE		0.00	0.00	
95887 - NEEDLE EMG NONEXTREMTY MSCLES W/NERVE CONDUCTION	0.74	0.00	(0.74)	-100.00%
95907 - MOTOR &/SENS 1-2 NRV CNDJ PRECONF ELTRODE LIMB	1.05	0.00	(1.05)	-100.00%
95912 - MOTOR &/SENS 11-12 NRV CNDJ PRECONF ELTRODE LIMB		0.00	0.00	
95920 - INTRAOP NEUROPHYSIOLOGY TSTG PR HR	0.00	0.00	0.00	
<b>95925-95943 Neurotransmission Studies</b>	<b>6,377.62</b>	<b>5,806.79</b>	<b>(570.84)</b>	<b>-8.95%</b>
95925 - SHORT-LATENCY SOMATOSENS EP STD UPR LIMBS	1.13	2.83	1.70	150.00%
95926 - SHORT-LATENCY SOMATOSENS EP STD LWR LIMBS	0.57	0.00	(0.57)	-100.00%
95928 - CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ UPR LIMBS	1.57	1.57	0.00	0.00%
95929 - CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ LWR LIMBS	3.14	0.00	(3.14)	-100.00%
95930 - VISUAL EP TSTG CNS CHECKERBOARD FLASH	0.37		(0.37)	
95938 - SHORT-LATENCY SOMATOSENS EP STD UPR & LOW LIMBS	532.15	591.58	59.43	11.17%
95939 - CTR MOTR EP STD TRANSCRNL MOTR STIM UPR&LOW LIMB	1,295.66	1,514.75	219.08	16.91%
95940 - IONM 1 ON 1 IN OR W/ATTENDANCE EACH 15 MINUTES	1,208.03	430.95	(777.08)	-64.33%
95941 - IONM REMOTE/NEARBY MORE THAN 1 PATIENT IN OR PER HOUR	3,216.59	3,148.07	(68.53)	-2.13%
<b>95950-95962 Electroencephalography For Seizure Monitoring/Intraoperative Use</b>	<b>163.94</b>	<b>98.96</b>	<b>(64.98)</b>	<b>-39.63%</b>
95951 - MNTR F LOCLZJ CERE SEIZ FOC CABLE RADIO EEG VID	87.80		(87.80)	
95955 - EEG NONICRA SURG		1.06	1.06	
95961 - FUNCJAL CORTANDSUBCORT MAPG ELTRDS 1 HR PHYS ATTN	55.97	77.74	21.77	38.89%
95962 - FUNCJAL CORTANDSUBCORT MAPG ELTRDS EA HR PHYS ATTN	20.17	20.17	0.00	0.00%
<b>95970-95982 Evaluation of Implanted Neurostimulator</b>	<b>58.17</b>	<b>59.89</b>	<b>1.72</b>	<b>2.95%</b>
95978 - ELEC ALYS NSTIM PLS GEN CPLX DP BRN 1ST HR	51.30	51.30	(0.00)	0.00%
95979 - ELEC ALYS NSTIM PLS GEN CPLX DP BRN EA 30 MIN	6.87	8.59	1.72	25.00%
<b>95992-95999 Other and Unlisted Neurological Procedures</b>	<b>0.00</b>		<b>0.00</b>	
95999 - UNLIS NEUROLOGICAL NEUROMUSCULAR DX PX	0.00		0.00	
<b>G0008-G9156 Procedures/Professional Services (Temporary)</b>	<b>2,671.70</b>	<b>3,447.56</b>	<b>775.87</b>	<b>29.04%</b>
<b>G0127-G3001 Untitled section</b>	<b>2,671.70</b>	<b>3,447.56</b>	<b>775.87</b>	<b>29.04%</b>
G0453 - CONT INTRAOP NEURO MONITOR	2,671.70	3,447.56	775.87	29.04%
<b>Grand Total</b>	<b>10,325.09</b>	<b>10,562.90</b>	<b>237.81</b>	<b>2.30%</b>

# **Exhibit 2**



DEPARTMENT OF NEUROLOGY  
DIVISION CHIEF BUDGET MEETINGS  
FISCAL YEAR 2019  
Meeting Date: January 18, 2018

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Epilepsy                             | <input type="checkbox"/> Multiple Sclerosis              | <input type="checkbox"/> Stroke & Neuro Critical Care |
| <input type="checkbox"/> Headache Center                      | <input type="checkbox"/> Neuromuscular & Neurophysiology |   |
| <input checked="" type="checkbox"/> Intraoperative Monitoring | <input type="checkbox"/> Neuro Oncology                  |   |
| <input type="checkbox"/> Memory & Aging Center                | <input type="checkbox"/> Neuro Rehabilitation            |   |
| <input type="checkbox"/> Movement Disorders                   | <input type="checkbox"/> Neuro Psychology                |   |
- 
- 

**CLINICAL**

New Clinical Faculty Recruits or Departures (Name / Subspecialty / Rank / Current Residence):

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ACGME Clinical Fellow Recruits (Name / PGY Level / Name of Fellow Being Replaced):

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Non-ACGME Clinical Instructor Fellow Recruits (Name / PGY Level / Name of Fellow Being Replaced):  
(Include programs certified by UCNS)

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Clinical Volume Growth Assumption (based on the six month period ended December 2017):

CYTD Net Coll: \$443,570      CYTD wRVUs: 8,022      Matched Net Coll/wRVU (12 mos): \$60.20

Seasonal wRVU %: 45.2%      CY Seasonalized wRVU Proj.: 17,500      CY wRVU Budget: 17,555

Seasonal Net Coll %: 45.6%      CY Net Coll Projection: \$1,052,026      CY Net Coll Budget: \$1,022,089

Next Year Faculty wRVU Budget Forecasts: \_\_\_\_\_

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MGMA Academic Practice wRVU Benchmark (2016 Report, Table 43, Neurology, Median): 3,539

DEPARTMENT OF NEUROLOGY  
DIVISION CHIEF BUDGET MEETINGS

Next Year Division wRVU Budget Forecast Total: \_\_\_\_\_

Clinical Equipment and Staffing Needs:

Clinic Needs: \_\_\_\_\_

Hospital Needs (Including Inpatient/Outpatient): \_\_\_\_\_

\_\_\_\_\_

Space Needs:

\_\_\_\_\_

\_\_\_\_\_

MSOA Needs:

\_\_\_\_\_

\_\_\_\_\_

Administrative Needs:

\_\_\_\_\_

\_\_\_\_\_

**RESEARCH**

Clinical Trials Needs: \_\_\_\_\_

\_\_\_\_\_

Basic Sciences Needs: \_\_\_\_\_

\_\_\_\_\_

Additional Research Needs:

❖ Research Fellow Recruits (Name / Name of RA Being Replaced): \_\_\_\_\_

❖ Space: \_\_\_\_\_

❖ Support Staff (Administrative, Coordinator, Regulatory): \_\_\_\_\_

❖ Equipment: \_\_\_\_\_

**EDUCATION**

Educational Needs: \_\_\_\_\_

\_\_\_\_\_

DEPARTMENT OF NEUROLOGY  
DIVISION CHIEF BUDGET MEETINGS

**DEVELOPMENT/FUNDRAISING & MARKETING PLANS:**

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**DIVISION STRATEGIC PLANNING GOALS & OBJECTIVES (list and plan the 3 highest priorities):**

- 1.** 

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- 2.** 

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- 3.** 

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# **Exhibit 2**

**LAC+USC Current Staffing Model**

Department of Neurology

	Weekly Hours	Annual FTE	(1)
<b>WEEKDAY CLINICAL ATTENDINGS</b>			
Neurology Neuro Critical Care Service (Gold) – Attendings	90.00	2.66	(4) (3)
Neurology Neuro Critical Care Service (Gold) – Fellow	40.00	1.18	(4) (3)
Neurology Stroke Service (Red)	40.00	1.18	(3)
General Inpatient Neurology Service: Primary & Consults (Green)	40.00	1.18	
General Neurology Clinic	32.00	0.95	
Epilepsy Clinic + Epilepsy Surgical Conference	29.50	0.87	
Epilepsy Dietary Clinic	2.00	0.06	
Neuro Oncology Clinic + Tumor Board	6.00	0.18	
Neurology OB Clinic	3.00	0.09	
Multiple Sclerosis Clinic	8.00	0.24	
Movement Disorders Clinic	6.00	0.18	
Neuromuscular Clinic	2.00	0.06	
HIV Clinic	10.00	0.30	
Jail Clinic	2.00	0.06	
EEG Reading	15.00	0.44	
Pediatric Neurology	9.00	0.27	
EMG Procedures	30.00	0.89	
Epilepsy Procedures – WADA	4.00	0.12	
IOM Technicians	120.00	3.55	(5) *
IOM Attending	40.00	1.18	*
Neurology Neuro Critical Care Service (Gold) – Call Weekdays	70.00	0.26	(2) (3)
Neurology Stroke Service (Red) – Call Weekdays	80.00	0.30	(2) (3)
Neurology General Service (Green) – Call Weekdays	80.00	0.30	(2)
EEG Reading – Call Weekdays	120.00	0.44	(2)
IOM Attending – Call Weekdays	80.00	0.30	(2) *
eConsult Clinical Sessions	11.75	0.35	
<b>SUBTOTAL WEEKDAY CLINICAL ATTENDINGS</b>	<b>970.25</b>	<b>17.55</b>	
<b>WEEKEND CLINICAL ATTENDINGS</b>			
Neurology Neuro Critical Care Service (Gold) – Weekends	16.00	0.47	(4) (3)
Neurology Stroke Service (Red) – Weekends	16.00	0.47	(3)
Neurology General Service (Green) – Weekends	8.00	0.24	
Neurology Neuro Critical Care Service (Gold) – Call Weekends	32.00	0.12	(2) (3)
Neurology Stroke Service (Red) – Call Weekends	32.00	0.12	(2) (3)
Neurology General Service (Green) – Call Weekends	40.00	0.15	(2)
EEG Reading – Call Weekends	48.00	0.18	(2)
IOM Attending – Call Weekends	48.00	0.18	(2) *
<b>SUBTOTAL WEEKEND CLINICAL ATTENDINGS</b>	<b>240.00</b>	<b>1.92</b>	
<b>TOTAL WEEKLY ATTENDINGS</b>		<b>19.47</b>	

## Footnotes:

(1) FTE based on 1,760 work hours per year.

(2) On-call hours valued at a ratio of one hour paid at full salary for every eight on-call hours.

(3) Required to maintain primary stroke center certification.

(4) Neurocritical care neurologists at a higher AAMC rate than neurology generalists.

(5) IOM technicians' salary rate will be different from neurologists.

\*

**LAC+USC Current Staffing Model**

Department of Neurology

	Weekly Hours	Annual FTE <sup>(1)</sup>
<b>ADMINISTRATION AND RESIDENT/FELLOW INSTRUCTION</b>		
General Physician Administrative	60.00	1.77
On-call Administrator	20.00	0.59
MEC and Leadership Meetings	45.75	1.35
Residency Program Director—ACGME Required	23.00	0.68
Trauma and OB Team Oversight	-	-
CHLA Assignment / Skill Maintenance	-	-
Oversight and Management of Mid-level Providers	-	-
Resident and Fellow Oversight	20.00	0.59
Exam Prep / Simulations / Oral Exam	-	-
Resident/Intern Lectures	9.25	0.27
Resident Recruitment – Attending	-	-
LAC M&M / Q.I. / Clinical Competency Committee	3.75	0.11
Scheduling Faculty / Daily Resident	-	-
<b>SUBTOTAL ADMINISTRATION + INSTRUCTION</b>	<b>181.75</b>	<b>5.37</b>
<b>SUBTOTAL ALL PHYSICIAN SERVICE AND ADMIN</b>	<b>1,392.00</b>	<b>24.84</b>
LESS: County-direct Paid (CDP) Physicians		2.63 <sup>(3)</sup>
<b>KSOM LAC+USC PHYSICIAN FTE BASED ON CURRENT EFFORT</b>		<b>22.22</b>
<b>FUTURE PROGRAMMATIC NEEDS:</b>		
a. Neuro Critical Care Service (Gold)—Nurse Practitioner (approved, LAC hire pending)	40.00	1.18
b. Neuro Critical Care Service (Gold)—Fellow (second position)	40.00	1.18
c. Comprehensive Stroke Center—Vascular Neurologist	40.00	1.18
<b>SUBTOTAL FUTURE NEEDS</b>	<b>120.00</b>	<b>3.55</b>
<b>KSOM LAC+USC PHYSICIAN FTE CURRENT EFFORT AND FUTURE NEEDS</b>		<b>25.76</b>
<b>STAFF EFFORT</b>		
Administration (Finance, HR, Payroll)	45.00	1.33
Scheduling	-	-
Resident/Trainee Administration	60.00	1.77
Resident Research	-	-
OR and Staffing Analytics	-	-
Quality Improvement	44.00	1.30
<b>SUBTOTAL ADMINISTRATIVE STAFF EFFORT</b>	<b>149.00</b>	<b>4.40</b>
<b>TOTAL KSOM LAC+USC PHYSICIAN AND STAFF EFFORT</b>		<b>26.62</b>

## Footnotes:

<sup>(1)</sup> FTE based on 1,760 work hours per year.<sup>(2)</sup> On-call hours valued at a ratio of one hour paid at full salary for every eight on-call hours.<sup>(3)</sup> Chui (1.0), Lin (0.75), Partikian (0.875). Partikian has other CDP time in Pediatrics.



# **Exhibit 2**

University of Southern California  
Keck School of Medicine  
Budget Allocation

DEPARTMENT:		Neurology			
FY 14 Allocation					
			FY13	FY14	Variance
FY14 Department Allocation					
Current Unrestricted					
	Research Effort		375,000	121,268	(253,732)
	MD Teaching Effort		43,601	TBD	TBD
Total Effort Allocation - CU			418,601	121,268	(253,732)
MSOA					
	Neurology (1)		2,009,917	1,882,727	(127,190)
	Ryan White Neurology		39,021	39,021	0
	Management Performance		TBD	TBD	TBD
	ACGME Program Director - Neurology		72,909	72,909	0
	MSOA-NEUROLOGY ACGME ADDEN A-3		242,550	242,550	0
	MSOA-NEUROLOGY IOM ADDEN A-3		242,550	242,550	0
	MSOA-NEUROLOGY IOM TECH SUPPORT (2)		157,983	303,000	145,017
	County Effort (MSOA)		2,764,930	2,782,757	17,827
	Total Dean's Allocation		3,183,531	2,904,025	(235,905)
Footnotes					
(2) Base budget was increased by \$127,190 from FY13 amount for IOM Tech services at 21,198.44 per month for six months. Remaining budget for FY13 and future budget for IOM Tech service budgeted to 84-2122-0904.					
(3) FY 13 budget based upon Nov 2013 addendum start date					

# **Exhibit 2**

17/1



operative Note  
nal Report \*

**\* Final Report \***

**cedure Date:** 12/1/2017

**performing Physician:** Mark Spoonamore, M.D.

**Technician:** MV

**#:** 23

**ient History:** 35F morbidly obese s/p AVP w/ the following ortho injuries: Sacral fx, R LC II pelvic fx, R Schatzker  
dial plateau fx, multiligamentous unstable L knee s/p bilateral external fixation 11/21/17

**urgical Procedure:** L3-pelvis PSF

**MONITORING MODALITIES:**

SEPs (somatosensory evoked potentials), TcMEPs (transcranial motor evoked potentials) and free run EMG.

**RESULTS:**

During the procedure the aforementioned modalities were continuously monitored.

The surgeon was informed at baseline that the patient's bilateral vastus/hamstring and bilateral T/A, gastroc were  
present. All other potentials amplitudes were adequate for monitoring bilaterally. These waveforms remained stable  
throughout the procedure. No adverse electrodiagnostic events were encountered during monitoring. 5 hours were  
spent monitoring, and the surgeons were kept informed of the monitoring status and any significant changes.

**COMMENT:** The absence of motor evoked potentials in the bilateral vastus, bilateral hamstring, bilateral T/A and  
bilateral gastroc extremities suggests a baseline abnormality, anesthetic effect, or an intrinsic variability of this  
modality. Clinical correlation is strongly advised.

**Signature Line**

Electronically Signed on 12/01/17 16:22 PST

\_\_\_\_\_  
Nancy, Nancy, Dept. Tech

External DHS Workforce

Options Connect USB Device Send Ctrl-Alt-Delete

Task Edit View Patient Chart Links Notifications Options Current Add Help

Physician Handoff Home Message Center Patient List Discharge Dashboard MyDHS Amien iMediConsent E-Consult Critic Abnor 0 CURES DHS - CCL POLST GoToAssist

Year Off Suspend Charges Exit Calculator Ad-Hoc Specimen Collection PM Conversation Communicate Patient Education Add Patient Pharmacy iAware Scheduling Appointment Book

Attending: [Redacted] DOB: [Redacted] Age: 36 years Code Status: N/A MRN: [Redacted]  
 Allergies: No Known Medication Allergies Hold Status: N/A Sex: M Dosing Wt: 151.270 kg (02/20/2018) FIM: [Redacted]  
 Care Team: <No Primary Contact> Isolation: N/A Emp Prov: Dominguez, Barbara E Loc: A, 106; A

Menu

- Neurology Workflow
- Overview
- Results Review
- Orders + Add
- Documentation + Add
- Task List
- Allergies + Add
- Chart Search
- Clinical Research
- Diagnosis & Problems
- Flowsheet and I&O
- Form Browser
- Growth Chart
- Health Maintenance

Orders

+ Add Document Medication by Hx Reconciliation Check Interactions External Rx History No Check

Reconciliation Status: Meds History Admission Discharge

Orders Medication List Document In Plan

View

Plans

Document In Plan

Suggested Plans (0)

Orders

Admit/Transfer/

Patient Care

Restraints/Hold

Activity

Diet/Nutrition

Fluids/Continuous

Medications

Laboratory

Diagnosis & Problems

Related Results

Displayed: All Active Orders | All Inactive Orders | All Orders (All Statuses)

Show More Orders

Order Name	Status	Details	Ordering Physician
Inactive			
Orthotic Equipment	Discontin...	01/17/18 8:26:00 PST, hinged knee brace	Iyengar, Ashwin
95939 Central Motor Evoked Potential (MEP) Study (TMS), U...	Completed	12/01/17 16:23:00 PST, Completed by Nurse?	Gonzalez, Andres A.
95938 Short-Latency Somatosensory Evoked Potential (SSEP)...	Completed	12/01/17 16:23:00 PST, Completed by Nurse?	Gonzalez, Andres A.
95940 Continuous IONM (personal)	Completed	12/01/17 16:23:00 PST, Completed by Nurse?	Gonzalez, Andres A.
95861 Electromyography (EMG), 2 Extremities	Completed	12/01/17 16:22:00 PST, Completed by Nurse?	Gonzalez, Andres A.
Special			
Active			
Removal of Catheter	Ordered	11/09/17 17:05:55 PST	CUTLER, CUTLER

Details

Dx Table Orders For Co-signature Orders For Nurse Review Orders For Signature

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External DHS Workforce

Options Connect USB Device Send Ctrl-Alt-Delete

Order Information for: 95940- Continuous IONM (personal)

Task View Help

Original order entered and electronically signed by Nguyen, Nancy on 12/01/2017 at 16:22 PST.  
 No Cosign Required (Per Protocol) order by Gonzalez, Andres A.  
 Ambulatory Procedures Department  
 95940- Continuous IONM (personal)

Details Additional Info History Comments Validation Results Ingredients Pharmacy

**Details**

Requested Start Date/Time 12/01/2017 16:23 PST

Completed by Nurse? Yes

Frequency Q15MIN-INT

Duration 5

Duration Unit hr

Start

19/3

External DHS Workforce

Options: Connect USB Device Send Ctrl-Alt-Delete

Order Information for: 95940- Continuous IONM (personal)

Task View Options Help

Original order entered and electronically signed by Nguyen, Nancy on 12/01/2017 at 16:22 PST.  
No Cosign Required (Per Protocol) order by Gonzalez, Andres A.  
Ambulatory Procedures Department  
95940- Continuous IONM (personal)

Details Additional Info History Comments Validation Results Ingredients Pharmacy

Status Change 12/01/2017 21:32 PST  
Order 12/01/2017 16:23 PST

Entered and electronically signed by SYSTEM, SYSTEM Cerner on 12/01/2017 at 21:32 PST.  
Ordered by Gonzalez, Andres A.

Status	After	Before
Order Status	Completed	Ordered
Department Status	Completed	Ordered

Details

Order 12/01/2017 16:23 PST  
Entered and electronically signed by Nguyen, Nancy on 12/01/2017 at 16:22 PST.  
No Cosign Required (Per Protocol) order by Gonzalez, Andres A.

Status

Order Status: Ordered

Department Status: Ordered

Details

Requested Start Date/Time: 12/01/2017 16:23 PST

Completed by Nurse?: Yes

Frequency: Q15MIN-INT

Duration: 5

Start

1/10/2017



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Operative Report  
Final Report \*



**\* Final Report \***

**Operative Report**

**REPORT OF OPERATION**

DEPARTMENT: ORTHOPAEDIC SURGERY-OS DATE OF OPERATION: December 01, 2017

ATTENDING SURGEON: Mark J. Spoonamore, MD

ASSISTED BY: Elliot Thomas Min, MD

ASSISTING SURGEON: Elliot Thomas Min, MD

ASSISTANT(S): 1. Elliot Thomas Min, MD.  
Mark Christopher Howard, MD.

OPERATIVE DIAGNOSIS: L5 sacral fracture and pelvic fractures.

POSTOPERATIVE DIAGNOSIS: L5 sacral fracture and pelvic fractures.

PROCEDURE PERFORMED: L3 to pelvis posterior spinal fusion.

ANESTHESIA: General endotracheal anesthesia was used.

FINDINGS: Gross spinal instability secondary to fractures.

COMPLICATIONS: There were no complications.

NEUROMONITORING: MEPs and SSEPs were used for neuromonitoring.

IMPLANTS: Zimmer Biomet pedicle screws and iliac screws were used along with a Zimmer Biomet rod and connectors as well as crosslinks. An allograft was used for bony fusion.

HISTORY: Patient was a 35-year-old female who presented to the emergency room after an auto versus pedestrian at approximately 25 miles per hour. She was thrown 20 feet. No loss of consciousness. On exam, she was noted to be intact but with multiple bilateral lower extremity injuries. A CT scan of the abdomen and pelvis was performed demonstrating multiple spine, sacral, and pelvic fractures including an L4 vertebral body fracture, L5 right pedicle fracture as well as transverse process fracture, a right sacral alar fracture as well as superior and inferior right pubic rami fracture. The case was discussed at Spine Conference and the recommendation was for spinopelvic fixation with instrumentation from L3 to pelvis. Given that the patient was neuro intact without evidence of bowel or bladder dysfunction, the decision was made to attempt decompression of her sacral fracture. The risks, benefits, and alternatives associated with surgery were discussed in detail with the patient. The risks included, but were not limited to, infection, bleeding, nerve root or spinal injury, paralysis or loss of bowel or bladder function, CSF leak, postoperative back pain, instability, or reoperation. Medical complications included heart attack, stroke, DVT or PE, pneumonia, and possibly death. Despite the risks of surgery, she wishes to continue and consented to proceed with operative intervention.

DESCRIPTION OF PROCEDURE: On the day of surgery, the patient was brought back to the operating room. She underwent endotracheal intubation with induction of general anesthesia without any complication. Appropriate intravenous lines were placed. The patient was then fully turned and placed prone on a Jackson table. Of note, patient was in bilateral lower extremity external fixation and special care was





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Operative Report  
 Final Report \*

to ensure that all points of contact of the external fixators with the bed and the patient were appropriately padded. Care was taken then to ensure that all bony prominences were padded and that there was no excessive traction on any of her extremities and that her abdomen was lying freely. Once we were sure that she was in appropriate position without evidence of compression, the patient's back was then marked and padded and draped in sterile fashion. Surgical time-out was performed to confirm the patient's identity and the intended surgical procedure.

An incision was then infiltrated with lidocaine with epinephrine and a 10 blade was used to make an incision. Monopolar cautery was used to carry out the dissection to the level of the fascia. The fascia was then opened above L5 where a fracture of the spinous process was immediately noted. This was confirmed to be the correct level using fluoroscopy. Dissection was then carried out subfascially to expose the L3, L4, and L5 lumbar vertebrae with special care taken to not expose the L2-3 facet joint. Further dissection was then performed to expose the sacrum. Once appropriate lumbar vertebrae were exposed, pedicle screws were then placed on the left side at L3, L4, L5, and S1, and on the right side at L3 and L4. At the L3 levels, 6.5 x 40 pedicle screws were used for both the right and the left sides. At L4, 6.5 x 45 pedicle screws were used on the right and left side. On the left L5, a 7.5 x 40 pedicle screw was used and on the right S1, an 8.5 x 35 pedicle screw was used. Screws were then checked using fluoroscopy and noted to be in good position. At this point, attention was turned to the iliac screws. The left PSIS was exposed using a Meyering retractor and a Taylor retractor and monopolar cautery. Osteotomes were then used to remove part of the PSIS. An iliac probe was then introduced into the bony defect of the ilium and guided using fluoroscopy through the ilium toward the sciatic notch. Once the probe was felt to be in good position, the hole for the iliac screw was then tapped and an 8.5 x 80 mm screw was then introduced. On the right side, the PSIS was exposed. The bone was removed using a Leksell rongeur and an iliac probe was then used. The probe was advanced to approximately 90 mm and noted to be in good position. The hole was then tapped and an 8.5 x 90 mm screw was then introduced. Fluoroscopy was used to ensure that both iliac screws were in good position. At this point, a cobalt chrome rod was cut and introduced into the right and left iliac screws. A lateral connector was used to connect the rod to the iliac screws. The rod was then fixed into place using end caps laterally. On the right side, a compressor was used to reduce the right pelvic fracture and the end caps were then final tightened. Once all end caps were final tightened, 2 medium sized crosslinks were placed between L3-4 and L4-5. These crosslinks were then final tightened as well. A lateral x-ray was then performed using fluoroscopy and all screws and rods were noted to be in good position. The wound was then copiously irrigated with antibiotic irrigation and the bone was then subsequently decorticated using a high speed drill. A mix of DBX allograft as well as patient's own autograft was then placed onto the decorticated bone, making sure that bone graft was placed into the lateral gutters as well as the decorticated lamina and facet joints. Once the bone graft was laid down, 2 gm of vancomycin powder were then introduced into the wound. 10 flat JPs were then tunneled subfascially. The fascia was then closed using 0 Vicryl sutures. The subcutaneous tissue was then closed using 2-0 deep dermal sutures and then a skin stapler was used to close the skin. The two 10 flat JPs were then secured using 3-0 nylon sutures. Dressing and antibiotic ointment were then placed over the incision. The drapes were then taken down. The patient was flipped back onto her back and was extubated in stable condition. Of note, the patient did not suffer any complications of being prone in her bilateral external fixators. The patient was then taken to stepdown in stable condition. All sponge counts and needle counts were noted to be correct at the end of the

Attended By: Elliot Thomas Min, MD

Mark J. Spoonamore, MD

1/MODL

#: 222210/767593741

Signature Line

Electronically Signed on 12/06/17 10:09 PST

\_\_\_\_\_  
 Elliot Thomas, MD

Electronically Signed on 01/10/18 10:00 PST

\_\_\_\_\_  
 Spoonamore, Mark J., MD

erative Report  
nal Report \*

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in OR Intraoperative Record  
 nal Report \*

**\* Final Report \***

**; Main OR Intraop Nursing Record (Verified)**

**SC Main OR Intraop Nursing Record Summary**

Primary Physician: Spoonamore, Mark J.  
 Case Number: USCOR-2017-  
 Normalized Date/Time: 12/06/17 06:59:19  
 Name:   
 O.B./Sex:   
 Id Rec #:   
 Physician: Levine, Michael D.  
 Financial #:   
 Type: I  
 Room/Bed: 106/A  
 Limit/Disch: 11/20/17 13:53:00 -  
 Institution:

**Safety Checklist 2) Time Out - USC MOR**

**Pre-Care Text:**

A.10 Confirms patient identity A.20 Verifies operative procedure, surgical site, and laterality A.20.1 Verifies consent for planned procedure A.30 Verifies allergies

**Entry 1**

Time Out was conducted based on the DHS Final Time Out Checklist/Standards:	Yes	Comments	N/A
Time Out Participants ceased activity, confirmed patient, site, procedure, and consents	Yes	Comments	N/A
Time Out Members	Min, Elliot Thomas, Gruver, Charles John, Parson RN, Lauri, Nguyen, Nancy, Howard, Mark Christopher, Sum RN, Anna	Time Out Time	12/01/17 12:13:00

**Post-Care Text:**

E.30 Evaluates verification process for correct patient, site, side, and level surgery

**Surgical Procedures - USC MOR**

**Pre-Care Text:**

A.20 Verifies operative procedure, surgical site, and laterality A.20.2 Assesses the risk for unintended retained foreign body Im.20 Performs required counts

**Entry 1**

Procedure Description	Fusion Spine Lumbar Posterior	Procedure Code	ARTHRODESIS POSTERIOR/POSTEROLATERAL LUMBAR
Modifiers	Spine-lumbar, Pelvis	Additional Procedure Detail	L3-pelvis posterior spinal fusion

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In OR Intraoperative Record  
Final Report \*

Primary Procedure	Yes	Attending Surgeon of Record	Spoonamore, Mark J.
Start	12/01/17 12:14:00	Stop	12/01/17 16:50:00
Anesthesia Type	General	Surgical Service	Orthopedic (SN)
Wound Class	1-Clean		

## Post-Care Text:

0.730 The patient's care is consistent with the individualized perioperative plan of care

## Use Times - USC MOR

## Entry 1

Patient			
Patient In Room Time	12/01/17 09:53:00	Patient Out Room Time	12/01/17 17:23:00
Procedure Start Time	12/01/17 12:14:00	Procedure Stop Time	12/01/17 16:50:00

## Use Attendance - USC MOR

## Entry 1

Use Attendee	Spoonamore, Mark J.
Role Performed	Surgeon - Attending
Time In	12/01/17 14:14:00
Time Out	12/01/17 15:05:00
Procedure(s)	Fusion Spine Lumbar Posterior(Spine-lumbar, Pelvis)

## Entry 2

Min, Elliot Thomas
Surgical Resident
12/01/17 09:53:00
12/01/17 17:23:00
Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis)

## Entry 3

Gruver, Charles John
Anesthesia Resident
12/01/17 09:53:00
12/01/17 17:09:00
Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis), Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis)

## Entry 4

Use Attendee	Parson RN, Lauri
Role Performed	Circulator - Primary
Time In	12/01/17 09:53:00
Time Out	12/01/17 17:23:00
Procedure(s)	Fusion Spine Lumbar Posterior(Spine-lumbar, Pelvis)

## Entry 5

Sum RN, Anna
Scrub - Primary
12/01/17 09:53:00
12/01/17 14:00:00
Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis)

## Entry 6

Nguyen, Nancy
Other Authorized Personnel
12/01/17 10:15:00
12/01/17 17:23:00
Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis)

## Entry 7

Use Attendee	Howard, Mark Christopher
Role Performed	Surgical Resident
Time In	12/01/17 09:53:00
Time Out	12/01/17 17:23:00
Procedure(s)	Fusion Spine Lumbar Posterior(Spine-lumbar, Pelvis)

## Entry 8

Estrella RN, Segundo
Circulator - Relief
12/01/17 12:20:00
12/01/17 12:55:00
Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis)

## Entry 9

Hunter, Karen
Radiology Tech
12/01/17 13:09:00
12/01/17 17:23:00
Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis)

## Entry 10

Use Attendee	Estrella RN, Segundo
Role Performed	Circulator - Relief
Time In	12/01/17 14:38:00
Time Out	12/01/17 14:55:00
Procedure(s)	Fusion Spine Lumbar Posterior(Spine-lumbar, Pelvis)

## Entry 11

Hill, Gary
Scrub - Relief
12/01/17 13:55:00
12/01/17 17:23:00
Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis)

## Entry 12

Andal RN, Ryan
Circulator - Relief
12/01/17 17:00:00
12/01/17 17:23:00
Fusion Spine Lumbar
Posterior(Spine-lumbar, Pelvis)



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Entry 13

Use Attendee Dowling, Melissa L.  
 Role Performed CRNA  
 Time In 12/01/17 16:57:00  
 Time Out 12/01/17 17:37:00  
 Procedure(s) Fusion Spine Lumbar  
 Posterior(Spine-lumbar,  
 Pelvis)

General Comments:

PHIL PANFILI AND STAN RULAND, REP FROM BIO MED PRESENT IN THE ROOM

Catheter, Drains, Tub - USC MOR

Pre-Care Text:

A.310 Identifies factors associated with an increased risk for hemorrhage or fluid and electrolyte imbalance  
 Im.250 Administers care to invasive device sites

Entry 1

Entry 2

Device Description	TRAY CATHETERIZATION SURESTEP BARDEX COMPLETE CARE STATLOCK 16FR URINE METER	DRAIN INCISION NOVATION PLUS SILICONE FLAT FULL FLUTE L20 CM X W10 MM STERILE
Device Type	Indwelling	Bulb Reservoir
Location	Bladder	Back mid
Balloon Inflation	10 ML	
Location Detail		L3
Present on Arrival?	No	No
Inserted By	Parson RN, Lauri	Min, Elliot Thomas
Removed at End of Case?	No	No
Removed By		
Drainage Details		
Drainage?	Yes	Yes
Amount	Measured in Milliliters (mL)	Measured in Milliliters (mL)
Color	Yellow	Red
Consistency	Watery	Watery
Drainage System	Dependent drainage bag	Suction Reservoir
Drainage Type		Serosanguineous
Order	Absent	Absent
Outcome Met (0.60)	Yes	Yes

Post-Care Text:

E.340 Evaluates tubes and drains are intact and functioning as planned 0.60 Patient is free from signs and symptoms of injury caused by extraneous objects

Counts Verification - USC MOR

Pre-Care Text:

A.20 Verifies operative procedure, surgical site, and laterality A.20.2 Assesses the risk for unintended retained foreign body Im.20 Performs required counts

Entry 1

Procedure	Fusion Spine Lumbar Posterior(Spine-lumbar, Pelvis)		
Initial Counts			
Initial Counts	Parson RN, Lauri, Sum	Items included in	Sponges, Sharps
Performed By	RN, Anna	the Initial Count	
Wet Count			
Closing Counts			
Closing Counts	Parson RN, Lauri, Hill,	Items included in	Sponges, Sharps
Performed By	Gary	the Closing Count	
Final Counts			

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 nal Report \*

Final Count Status Correct Did you use Radio Frequency Wandering for this case? No  
 Final Counts Performed By Parson RN, Lauri, Hill, Gary Items Included in Final Count Sponges, Sharps  
 Outcome Met (0.20) Yes

Post-Care Text:

E.50 Evaluates results of the surgical count 0.20 Patient is free from unintended retained foreign objects

Patient Positioning - USC MOR

Pre-Care Text:

A.240 Assesses baseline skin condition A.280 Identifies baseline musculoskeletal status A.280.1 Identifies physical alterations that require additional precautions for procedure-specific positioning A.510.8 Maintains patient's dignity and privacy Im.120 Implements protective measures to prevent skin/tissue injury due to mechanical sources Im.40 Positions the patient Im.80 Applies safety devices

Entry 1

Procedure	Fusion Spine Lumbar Posterior(Spine-lumbar, Pelvis)	Body Position	Prone
Left Arm Position	Overhead	Right Arm Position	Overhead
Left Leg Position	Extended	Right Leg Position	Extended
Feet Uncrossed?	Yes	Pressure Points Checked	Yes
Additional Information	PILLOWS X 4 UNDER BLE; COTTON TOWELS WRAPPED AROUND BED FRAME AT THIGH; PRONE VIEW MIRROR WITH FOAM FACE SUPPORT; BUE SUPPORTED WITH BLUE FOAM CRATE; EX-FIX FRAME CUSHIONED WITH YELLOW FOAM CRATE AND ABD PADS X 4; SHEET SLING TO SUPPORT ABD.	Positioning Device	Board - Arm, Elbow Protector, Head Protector, Positioner - Pillow, Strap - Arm, Strap - Safety, Table - Spinal, Tape, Positioner - Head
Positioned By	Min, Elliot Thomas, Parson RN, Lauri, Gruver, Charles John, Howard, Mark Christopher, Nguyen, Nancy	Safety Strap Applied?	Yes
Location	Arms, Above Knees, Chest	Outcome Met (0.80)	Yes

Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue E.290 Evaluates musculoskeletal status 0.80 Patient is free from signs and symptoms of injury related to positioning

Assessment of Body - USC MOR

Entry 1

Date/Time Checked	12/01/17 15:08:00	Site	Leg, left, Arm, right, Head, Arm, left, Arm, right
-------------------	-------------------	------	--

Skin Prep - USC MOR

Pre-Care Text:

A.30 Verifies allergies A.20 Verifies procedure, surgical site, and laterality A.510.8 Maintains patient's dignity and privacy Im.270 Performs Skin Preparation Im.270.1 Implements protective measures to prevent skin and tissue injury due to chemical sources A.300.1 Protects from cross-contamination

Entry 1

Skin Prep			
Prep Agents (Im.270)	Iodine Povacrylex and Isopropyl Alcohol	Prep By	Min, Elliot Thomas
Prep Area (Im.270)	Spine lumbar	Prep Area Details	Bilateral

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12in OR Intraoperative Record  
nal Report \*

Skin Prep Agent Dry	Yes		
Without Pooling			
Hair Removal			
Hair Removal Methods	Clipper	Hair Removal By	Min, Elliot Thomas
Hair Removal Site	Back	Hair Removal Site	Bilateral
Outcome Met (O.100)	Yes	Details	

## Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue O.100 Patient is free from signs and symptoms of chemical injury

## General Case Data - USC MOR

## Pre-Care Text:

A.350.1 Classifies surgical wound  
Entry 1

## Case Information

OR	USC OR 23	Case Level	5
Found Class	1-Clean	Specialty	Orthopedic (SN)
ASA Class	2		
Preop Diagnosis	Dislocation of L4/L5 lumbar vertebra, initial encounter		

## Post-Care Text:

O.760 Patient receives consistent and comparable care regardless of the setting

## Implant Log - USC MOR

## Pre-Care Text:

A.20 Verifies operative procedure, surgical site, and laterality A.20.1 Verifies consent for planned procedure  
Im.350 Records implants inserted during the operative or invasive procedure

	Entry 1	Entry 2	Entry 3
Implant/Explant	Implant	Implant	Implant
Implant Identification			
Description	FILLER BONE VOID 20CC DBX ALLOGRAFT FREEZE DRIED MIX	FILLER BONE VOID 20CC DBX ALLOGRAFT FREEZE DRIED MIX	SCREW BONE POLARIS TRANSLATION TITANIUM L40 MM OD6.5 MM SPINE 5.5 MM 40MM
Size	20ML	20ML	
Serial Number	094160331111680018	094160331111680020	
Lot Number			
Manufacturer	MUSCULOSKELETAL TRANSPLANT FOUNDATION	MUSCULOSKELETAL TRANSPLANT FOUNDATION	BIOMET ORTHOPEDICS
Catalog #	058200	058200	14-578440
Expiration Date	04/28/19	04/28/19	
Age Data			
Implant Site	Spine-lumbar	Spine-lumbar	Spine-lumbar
Select Left or			
Tight when			
Applicable:			
Quantity			2
Outcome Met (O.30)	Yes	Yes	Yes
	Entry 4	Entry 5	Entry 6
Implant/Explant	Implant	Implant	Implant
Implant Identification			
Description	SCREW BONE TRANSLATION 5.5 Ti 7.5MM X 40MM	PLUG SPINAL SOLITAIRE LOCK	SCREW BONE TRANSLATION TITANIUM L45 MM OD6.5 MM SPINE CANNULATED 5.5 MM

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Size	40MM		45MM
Serial Number			
Lot Number			
Manufacturer	ZIMMER	ZIMMER	BIOMET ORTHOPEDICS
Catalog #	14-578540	2000-1005	14-578445
Expiration Date			
Age Data			
Implant Site	Spine-lumbar	Spine-lumbar	Spine-lumbar
Select Left or Right when applicable:			
Quantity	1	10	2
Outcome Met (0.30)	Yes	Yes	Yes
	<b>Entry 7</b>	<b>Entry 8</b>	<b>Entry 9</b>
Plant/Explant	Implant	Implant	Implant
Identification			
Description	SCREW BONE TRANSLATION 5.5 Ti 8.5MM X 45MM	SCREW BONE TRANSLATION TITANIUM L80 MM OD8.5 MM SPINAL CANNULATED 5.5 MM ROD MIS 80MM	ROD SPINAL POLARIS COCR HEXAGON L300 MM OD5.5 MM LOW PROFILE
Size	45MM		5.5X300
Serial Number			
Lot Number			
Manufacturer	ZIMMER	ZIMMER	ZIMMER
Catalog #	14-578645	14-578680	14-500578
Expiration Date			
Age Data			
Implant Site	Spine-lumbar	Spine-lumbar	Spine-lumbar
Select Left or Right when applicable:			
Quantity	1	2	1
Outcome Met (0.30)	Yes	Yes	Yes
	<b>Entry 10</b>	<b>Entry 11</b>	
Plant/Explant	Implant	Implant	
Identification			
Description	CONNECTOR ROD ARRAY TITANIUM MEDIUM THORACOLUMBAR SPINE CROSS	CONNECTOR ROD L50 MM LATERAL	
Size		50MM	
Serial Number			
Lot Number			
Manufacturer	BIOMET ORTHOPEDICS	BIOMET ORTHOPEDICS	
Catalog #	94672	2000-1022	
Expiration Date			
Age Data			
Implant Site	Spine-lumbar	Spine-lumbar	
Select Left or Right when applicable:			
Quantity	2	2	
Outcome Met (0.30)	Yes	Yes	

## Post-Care Text:

E.30 Evaluates verification process for correct patient, site, side and level surgery 0.30 Patient's procedure is performed on the correct site, side, and level



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**Medication Administration - USC MOR**

**Pre-Care Text:**

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue 0.10 Patient is free from

	Entry 1	Entry 2	Entry 3
Time Administered	12/01/17 12:30:00	12/01/17 12:14:00	
Medication	SEALANT HEMOSTATIC FLOSEAL BOVINE GELATIN MATRIX HUMAN THROMBIN 5 ML NEEDLE FREE ADAPTER APPLICATOR TIP	LIDOCAINE 1% with EPINEPHRINE 1:100,000 INJ, 20 ML INJ	GELFOAM POWDER ONE GRAM/ENVELOPE
Route of Admin	Instillation	Subcutaneous	Intracavernous
Dose	1		
Volume	10 mL	10 mL	8 gm
Administered By	Min, Elliot Thomas	Min, Elliot Thomas	Min, Elliot Thomas
Outcome Met (0.130)	Yes	Yes	Yes

	Entry 4	Entry 5
Time Administered		12/01/17 14:51:00
Medication	THROMBIN TOPICAL 20,000 UNITS	VANCOMYCIN 500MG INJECTION
Route of Admin	Intracavernous	Instillation
Dose		4
Volume	80000 units	2 gm
Administered By	Min, Elliot Thomas	Min, Elliot Thomas
Outcome Met (0.130)	Yes	Yes

**Post-Care Text:**

E.20 Evaluates response to medications 0.130 Patient receives appropriately administered medication(s)

**General Comments:**

5ML OF 1% LIDOCAINE WITH EPINEPHRINE 1:100,000+ 5ML OF NaCl = 0.5% LIDOCAINE WITH EPINEPHRINE 1: 200,000 USED FOR LOCAL ANESTHETIC

**-Ray and Images - USC MOR**

**Pre-Care Text:**

A.240 Assesses baseline skin condition A.240.1 Assesses history of previous radiation exposure Im.110 Implements protective measures to prevent injury due to radiation sources

	Entry 1	X-Ray Type	C-Arm, A/P
Site	Spine-lumbar		
Outcome Met (0.110)	Yes		

**Post-Care Text:**

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue 0.110 Patient is free from signs and symptoms of radiation injury

**Patient Care Devices - USC MOR**

**Pre-Care Text:**

A.200 Assesses risk for normothermia regulation A.40 Verifies presence of prosthetics or corrective devices Im.280 Implements thermoregulation measures Im.60 Uses supplies and equipment within safe parameters

	Entry 1	Entry 2
Equipment Type	WARMER BAIR HUGGER *USC	TABLE JACKSON *USC
Serial Number	03755	4756
Settings (if applicable)	43 DEGREE CENTIGRADE	
Serial Number (if applicable)		
Site Sterilized		
Comments	UPPERBODY BAIRHUGGER	
Outcome Met (0.700)	Yes	Yes

**Post-Care Text:**

E.10 Evaluates signs and symptoms of physical injury to skin and tissue 0.700 Patient is free from signs and

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symptoms of injury caused by extraneous objects

## urgical Irrigation - USC MOR

## e-Care Text:

A.280 Verifies allergies A.310 Identifies factors associated with an increased risk for hemorrhage or fluid and electrolyte imbalance Im.210 Administers prescribed solutions A.280.1 Implements protective measures to prevent skin or tissue injury due to thermal sources

	Entry 1	Entry 2
Irigant	Yes	Yes
Irigant Used:	SOLUTION IRRIGATION WATER 1 L PLASTIC POUR BOTTLE STERILE	SOLUTION IRRIGATION 0.9% SODIUM CHLORIDE 1 L PLASTIC POUR BOTTLE
Irigant Volume In	1000 mL	1000 mL
Irigant Volume Out	1000 mL	1000 mL
l irrigation		
ditives must be		
tered in the Med		
ministration		
gment.		
Outcome Met (O.300)	Yes	Yes

## st-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue O.300 Patient is free from signs and symptoms of injury due to thermal sources

## neral Comments:

NORAMAL SALINE 1L MIXED IN 50,000 UNITS OF BACITACIN X 4 SETS

## utery - USC MOR

## e-Care Text:

A.240 Assesses baseline skin condition A280.1 Identifies baseline musculoskeletal status Im.50 Implements protective measures to prevent injury due to electrical sources Im.60 Uses supplies and equipment within safe parameters Im.80 Applies safety devices

	Entry 1	Entry 2
U Type	Electrosurgical Unit	Electrosurgical Unit
entification	F8C59715A	F8C59792A
umber		
ccessories Used		
U Settings		
ipolar Setting	45	45
lend Setting		
oag Setting	45	45
ut Setting	45	45
Instrument/Model		
ype		
Other Settings		
ercentage		
ower Level		
emperature		
(Celsius)		
otal Time Used		
ounding Pad		
stalls		
rounding Pad	Yes	Yes
eeded?		
rounding Pad Lot	72020172X EXP	72020173X EXP.
umber	08/21/2019	08/22/2019
ithin Expiration	Yes	Yes
ate?		
rounding Pad Site	Thigh	Thigh
rounding Pad Site	Right	Left
etail		
air Removed Under	No	No
rounding Pad		
air Removed Using:		

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Skin Condition	Intact	Intact
Under Grounding Pad		
Verified By	Parson RN, Lauri	Parson RN, Lauri
Smoke Evacuation	No	No
Smoke Used		
Smoke Evacuation		
Unit:		
Outcome Met (0.10)	Yes	Yes

## Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue 0.10 Patient is free from signs and symptoms of injury related to thermal sources

## Dressing/Packing - USC MOR

## Pre-Care Text:

A.350 Assesses susceptibility for infection Im.250 Administers care to invasive devices Im.290 Administer care to wound sites Im.300 Implements aseptic technique  
Entry 1

Skin Prep Agent	Yes
Moved Prior to Dressing?	
Dressing Item	
Details	
Dressing Item (Im.290)	Other: See comments
Site	Spine lumbar
Outcome Met (0.200)	Yes

## Site Details

## Midline

## Post-Care Text:

E.320 Evaluate factors associated with increased risk for postoperative infection at the completion of the procedure 0.200 Patient's wound perfusion is consistent with or improved from baseline levels

## Nursing Comments:

BIOPATCH X 2; TEGADERM X 2; ISLAND DRESSING

## Skin Assessment - USC MOR

## Pre-Care Text:

A.240 Assesses baseline skin condition Im.120 Implements protective measures to prevent skin or tissue injury due to mechanical sources Im.280.1 Implements protective measures to prevent skin or tissue injury due to thermal sources Im.360 Monitors for signs and symptoms of infection  
Entry 1

Skin Integrity	Not intact
Condition Location	BLE

Skin Condition	
Outcome Met (0.60)	

Existing Wound	
Yes	

## Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue E.270 Evaluate tissue perfusion 0.60 Patient is free from signs and symptoms of injury caused by extraneous objects

## Nursing Comments:

PATIENT ARRIVED IN OR WITH SKIN TEAR LOCATED AT RIGHT LATERAL ANKLE AND HORIZONTAL SKIN TEAR AT LOWER BACK. EX-FIX PIN WOUNDS ON BLE

## Safety Checklist 3) Sign Out - USC MOR

## Pre-Care Text:

Im.330 Manages specimen handling and disposition  
Entry 1

Nurse verbally confirms with team	Yes
Name of the operative	
Procedure(s) and correct CPT code	
Nurse verbally confirms with team	NA
Equipment	

Nurse verbally confirms with team specimen identity and label	
---	--

NA

The nurse confirmed with the surgeon and the incision is:	
---	--

Closed

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problems to be

addressed

are the

instrument, sponge,

and needle counts

correct?

Yes

All team members  
 review key concerns  
 for recovery and  
 management of  
 patient

Yes

is this case a

trauma case?

No

Was this an  
 endoscopic case?

No

is an implant used

Yes

for this case?

Post-Care Text:

E.800 Ensures continuity of care E.50 Evaluates results of the surgical count

Departure from OR - USC MOR

Entry 1

Transport Time

12/01/17 17:22:00

Patient Handoff  
 Status

Drowsy

Transfer Evaluation  
 reassessment

ESU Pad Site Checked,  
 Tubes Drains Chains  
 Secured, Warm Blanket  
 Applied, Pressure Areas  
 Checked, Sterile  
 Dressing Intact  
 Extubated

Skin Condition

Warm, Dry

Patient Handoff  
 status

Oxygen in Use?

Yes

Flow Rate

6 L/min

Airway Device

Nasal Cannulae or Mask

Patient IV Access

Yes

Post-op Destination

Ward

tent

a

Discharge

Bed

Report Given By

Parson RN, Lauri

Report Given To

PARRAS, JENNY

General Comments:

SKIN TEARS (SEE SKIN ASSESSMENT) REPORTED TO FLOOR NURSE JENNY PARRAS, RN

Plays - USC MOR

Post-Care Text:

Im.760 Minimizes the length of invasive procedure by planning care

Entry 1

Play Reason

E-Vendor Delay

Description

12 VENDOR TRAYS TO OPEN  
 PRIOR BRINGING PT. TO OR

Case Comments

<None>

Finalized By: Parson RN, Lauri

Document Signatures

Signed By:

Andal RN, Ryan 12/01/17 17:42

Parson RN, Lauri 12/06/17 06:59

Unfinalized History

Date/Time

Username

Reason for Unfinalizing

Freetext Reason for Unfinalizing

12/06/17 06:56

E614114

Documentation Correction

implant quantity correction

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# **Exhibit 28**

intraoperative Note  
Final Report \*



**\* Final Report \***

**Procedure Date:** 12/1/2017

**Study #:** LAC 17-507

**Referring Physician:** Lucas, MD

**Technician:** PP

**#:** 7

**Patient History:** 57-year-old man with unstable L1 burst fracture.

**Surgical Procedure:** T11- L3 PSF and L1 lami

**MONITORING MODALITIES:**

SEPs (somatosensory evoked potentials) TcMEPs (transcranial motor evoked potentials) and free run EMG.

**RESULTS:**

During the procedure the aforementioned modalities were continuously monitored.

The surgeon was informed at baseline that the patient's motor evoked potentials were small and nonreliable in the lateral iliopsoas muscles, all other potentials amplitudes were adequate for monitoring bilaterally. These waveforms remained stable throughout the procedure. No adverse electrodiagnostic events were encountered during monitoring. 4 hours were spent monitoring, and the surgeons were kept informed of the monitoring status and any significant changes.

**DISCUSSION:**

No evidence of intraoperative spinal cord T11-L3 impairment was seen in the modalities monitored. Please see comment.

**RECOMMENDATION:** Clinical correlation is advised.

Further monitoring data is available by contacting the Intraoperative Neurophysiological Monitoring department.

**Signature Line**

Electronically Signed on 12/01/17 13:58 PST

---

ikh, Pooja, Department



operative Note  
nal Report \*



External DHS Workforce

Options Connect USB Device Send Ctrl-Alt-Delete

Task Edit View Patient Chart Links Notifications Options Current Add Help

Physician Handoff Home Message Center Patient List Discharge Dashboard MyDHS Amion iMedConsent E-Consult Critic: 0 Abnor: 0 CURES DHS - CCL POLST GoToAssist

Tear Off Suspended Charges Exit Calculator Ad-Hoc Specimen Collection PM Conversation Communicate Patient Education Add Patient Pharmacy iAware Scheduling Appointment Book

Attending: [Redacted] Age: 58 years Code Status: N/A MRN: [Redacted]  
 Hold Status: N/A Sex: Male Dosing Wt: N/A FINE: [Redacted]  
 Care Team: <No Primary Contact> Isolation: N/A Loc 7A: 140; 8

Menu

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Restraints/Hold S

Activity

Diet/Nutrition

Fluids/Continuou

Medications

Laboratory

Diagnoses & Problems

Related Results

Displayed: All Active Orders | All Inactive Orders | All Orders | All Statuses

Show More Orders...

Order Name	Status	Details	Ordering Physician
Orthotic Equipment	Ordered	12/02/17 23:38:00 PST, Cybertech TLSO b...	Rangwala, Shivani D
95861 Electromyography (EMG), 2 Extremities	Completed	12/01/17 13:46:00 PST	Gonzalez, Andres A.
95939 Central Motor Evoked Potential (MEP) Study (TMS), Up...	Completed	12/01/17 13:45:00 PST	Gonzalez, Andres A.
95938 Short-Latency Somatosensory Evoked Potential (SSEP) ...	Completed	12/01/17 13:45:00 PST	Gonzalez, Andres A.
95940 - Continuous IONM (personal)	Completed	12/01/17 13:45:00 PST, Q15MIN-INT, 4, hr	Gonzalez, Andres A.
Full Seizure Discontinuation	Discontinue	11/20/17 13:17:00 PST, Constant Order	Kudva, Ganesh A.

Details

Di Table Orders For Signature Orders For Nurse Review Orders For Signature

External DHS Workforce

Options ▾ Connect USB Device ▾ Send Ctrl-Alt-Delete

Order Information for: 95940- Continuous IONM (personal)

Task View Help

Original order entered and electronically signed by Parikh, Pooja on 12/01/2017 at 13:45 PST.  
No Cosign Required (Per Protocol) order by Gonzalez, Andres A.  
Ambulatory Procedures Department  
95940- Continuous IONM (personal)

Details Additional Info History Comments Validation Results Ingredients Pharmacy

**Details**

Requested Start Date/Time	12/01/2017 13:45 PST
Completed by Nurse?	No
Frequency	Q15MIN-INT
Duration	4
Duration Unit	hr

Start

h

External DHS Workforce

Options Connect USB Device Send Ctrl-Alt-Delete

Order Information for: 95940- Continuous IONM (personal)

Task View Options Help

Original order entered and electronically signed by Parikh, Pooja on 12/01/2017 at 13:45 PST.  
No Cosign Required (Per Protocol) order by Gonzalez, Andres A.  
Ambulatory Procedures Department  
95940- Continuous IONM (personal)

Details Additional Info History Comments Validation Results Ingredients Pharmacy

Status Change 12/01/2017 17:49 PST  
Order 12/01/2017 13:45 PST

Entered and electronically signed by SYSTEM, SYSTEM Cerner on 12/01/2017 at 17:49 PST.  
Ordered by Gonzalez, Andres A.

Status	After	Before
Order Status	Completed	Ordered
Department Status	Completed	Ordered

Details

Order 12/01/2017 13:45 PST  
Entered and electronically signed by Parikh, Pooja on 12/01/2017 at 13:45 PST.  
No Cosign Required (Per Protocol) order by Gonzalez, Andres A.

Status

Order Status Ordered

Department Status Ordered

Details

Requested Start Date/Time 12/01/2017 13:45 PST

Completed by Nurse? No

Frequency Q15MIN-INT

Duration 4



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narrative Report  
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**\* Final Report \***

**narrative Report**

**REPORT OF OPERATION**

DEPARTMENT: NEUROLOGICAL SURGERY-NS DATE OF OPERATION: December 01, 2017

ENDING SURGEON: Joshua W. Lucas, MD

ATED BY: Joshua W. Lucas, MD

RATING SURGEON: Joshua W. Lucas, MD

ISTANT(S): Phillip Alan Bonney, MD

OPERATIVE DIAGNOSIS: L1 Chance fracture.

TOPERATIVE DIAGNOSIS: L1 Chance fracture.

OCEDURE PERFORMED: T11 to L3 posterior spinal fusion, L1 laminectomy.

ESTHESIA: General endotracheal anesthesia.

PLICATIONS: None.

TRUMENTATION USED: NuVasive.

NITORING: SSEP and MEP neuromonitoring was used throughout the case and remained stable.

ICATIONS FOR PROCEDURE: The patient is a 57-year-old male who suffered a fall from height. The patient was noted to have mediate back pain, and CT of the lumbar spine demonstrated an L1 burst fracture with extension to the posterior bony structures. MRI of the lumbar spine was subsequently performed, which showed spinal canal stenosis at L1, as well as posterior ligamentous complex injury at the L1 level. The decision was made to take the patient to the operating room for definitive fixation of his fracture and small laminectomy at the site of the stenosis. The risks, benefits, alternatives, and expected hospital course were discussed with the patient. Risks included, but not limited to, infection, bleeding, injury to the spine and/or nerve roots including numbness, tingling, weakness after surgery, hardware failure, leak, misplacement of the hardware, need for revision surgery, possible need for surgery in the future, and medical complications including a stroke, DVT, PE, heart attack, and death. The patient understood the risks, and informed consent was signed.

DESCRIPTION OF PROCEDURE: The patient was brought to the operating room and intubated by Anesthesia. All lines were placed by Anesthesia. The patient was flipped prone on the Jackson table. Preoperative fluoroscopy was used to localize the incision. The area was prepped and draped in standard sterile fashion. A time-out was performed prior to procedure to verify correct patient and site. After time-out, a 10 blade knife was used to incise the skin in the midline of the back, and Bovie electrocautery was used to carry the incision down to the tips of the spinous processes. Intraoperative fluoroscopy was used to verify the correct levels. Bovie electrocautery was then used to perform subperiosteal dissection to the lateral extent of the transverse processes from L1 to L3 bilaterally, and to the tips of the transverse processes in the thoracic area over T11 and T12. Care was taken not to violate the facet joints at T10-T11 or L3-L4. After adequate exposure and hemostasis, pedicle screws were placed using standard technique including a Lenke pedicle probe, a Feeler tap, and ultimately screw placement. No pedicle violations were encountered. Instrumentation used was NuVasive Reline system. After placement of the screws at T11,

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L2, and L3, attention was turned to the laminectomy. A single-action rongeur was used to remove the spinous process and lamina over L1. A high-speed matchstick drill was then used to drill a laminectomy. The remaining bone was removed with a Kerrison rongeur after dissection with a Woodson elevator. After completion of the laminectomy, rods were placed bilaterally, along with set screws. These were finalized. A crosslink was placed over the laminectomy defect. Final x-rays were taken to verify correct placement of the construct. The incision was thoroughly irrigated with 3 L of antibiotic irrigation. Two JP drains were left in the epidural space and tunneled inferiorly. 1 g of vancomycin powder was added to the wound. The incision was subsequently closed with 0 Vicryl sutures for the muscle and fascia, followed by 3-0 Vicryl sutures for the dermal layer, followed by staples for skin. The JP drains were sutured in place with two 3-0 nylon sutures. All counts were correct at the end of the case. The patient was extubated and transferred to the ICU for further care.

dictated By: Joshua W. Lucas, MD

Joshua W. Lucas, MD

/MODL

#: 429122/767480976

Signature Line

Electronically Signed on 12/02/17 09:34 PST

\_\_\_\_\_  
 is, Joshua W., MD

Electronically Signed on 12/02/17 09:34 PST

\_\_\_\_\_  
 is, Joshua W., MD

in OR Intraoperative Record  
 nal Report \*

**\* Final Report \***

**; Main OR Intraop Nursing Record (Verified)**

**SC Main OR Intraop Nursing Record Summary**

Primary Physician: Lucas, Joshua W.  
 Case Number: USCOR-2017-17551  
 Scheduled Date/Time: 12/01/17 15:04:31  
 Patient Name: [REDACTED]  
 O.B./Sex: [REDACTED]  
 Ad Rec #: [REDACTED]  
 Physician: Lucas, Joshua W.  
 Financial #: [REDACTED]  
 Patient Type: I  
 Room/Bed: 118/A  
 Admit/Disch: 11/29/17 17:05:00 -  
 Institution:

**Safety Checklist 2) Time Out - USC MOR**

**Pre-Care Text:**

A.10 Confirms patient identity A.20 Verifies operative procedure, surgical site, and laterality A.20.1 Verifies consent for planned procedure A.30 Verifies allergies

**Entry 1**

Final Time Out was conducted based on the DHS Final Time Out Checklist/Standards:	Yes	Comments	N/A
Final Time Out participants ceased activity, confirmed patient, site, procedure, and consents	Yes	Comments	N/A
Time Out Members	Nercisian, Aren, Estrada RN, Andrea, Bonney, Phillip Alan, Poorman, Chelsea, Parikh, Pooja	Time Out Time	12/01/17 11:15:00

**Post-Care Text:**

E.30 Evaluates verification process for correct patient, site, side, and level surgery

**Surgical Procedures - USC MOR**

**Pre-Care Text:**

A.20 Verifies operative procedure, surgical site, and laterality A.20.2 Assesses the risk for unintended retained foreign body Im.20 Performs required counts

**Entry 1**

Procedure Description	Fusion Spine Lumbar Posterior	Procedure Code	POSTERIOR SEGMENTAL INSTRUMENTATION 3-6 VRT SEG
Additional Procedure Detail	T11-L3 posterior spinal fusion, L1 laminectomy	Attending Surgeon	Lucas, Joshua W.
Primary Procedure	Yes		

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Start	12/01/17 11:17:00	of Record	
Anesthesia Type	General	Stop	12/01/17 14:36:00
Room Class	1-Clean	Surgical Service	Neurosurgery (SN)

Post-Care Text:

O.730 The patient's care is consistent with the individualized perioperative plan of care

Base Times - USC MOR

Entry 1

Patient			
Patient In Room Time	12/01/17 09:40:00	Patient Out Room Time	12/01/17 14:48:00
Procedure Start Time	12/01/17 11:17:00	Procedure Stop Time	12/01/17 14:36:00

Base Attendance - USC MOR

Entry 1

Base Attendee Lucas, Joshua W.  
 Role Performed Surgeon - Attending  
 Time In 12/01/17 11:32:00  
 Time Out 12/01/17 13:40:00  
 Procedure(s) Fusion Spine Lumbar Posterior

Entry 2

Bonney, Phillip Alan  
 Surgical Resident  
 12/01/17 09:40:00  
 12/01/17 14:48:00  
 Fusion Spine Lumbar Posterior

Entry 3

Nercisian, Aren  
 Anesthesia Resident  
 12/01/17 09:40:00  
 12/01/17 14:48:00  
 Fusion Spine Lumbar Posterior

Entry 4

Base Attendee Benbassat, Maxim N.  
 Role Performed Anesthesiologist - Attending  
 Time In 12/01/17 09:40:00  
 Time Out 12/01/17 14:45:00  
 Procedure(s) Fusion Spine Lumbar Posterior

Entry 5

Estrada RN, Andrea  
 Circulator - Primary  
 12/01/17 09:40:00  
 12/01/17 14:48:00  
 Fusion Spine Lumbar Posterior

Entry 6

Poorman, Chelsea  
 Scrub - Primary  
 12/01/17 09:40:00  
 12/01/17 14:48:00  
 Fusion Spine Lumbar Posterior

Entry 7

Base Attendee Parikh, Pooja  
 Role Performed Other Authorized Personnel  
 Time In 12/01/17 09:40:00  
 Time Out 12/01/17 14:48:00  
 Procedure(s) Fusion Spine Lumbar Posterior

Entry 8

Wilson RN, Daphne  
 Circulator - Relief  
 12/01/17 10:05:00  
 12/01/17 10:30:00  
 Fusion Spine Lumbar Posterior

Entry 9

Seidner RN, Jessica  
 Circulator - Relief  
 12/01/17 12:13:00  
 12/01/17 12:47:00  
 Fusion Spine Lumbar Posterior

Entry 10

Base Attendee Andal RN, Ryan  
 Role Performed Scrub - Relief  
 Time In 12/01/17 12:14:00  
 Time Out 12/01/17 14:48:00  
 Procedure(s) Fusion Spine Lumbar Posterior

Entry 11

Seidner RN, Jessica  
 Circulator - Relief  
 12/01/17 14:17:00  
 12/01/17 14:48:00  
 Fusion Spine Lumbar Posterior

General Comments:

BRANDON SNOOK; VENDOR REPRESENTATIVE PRESENT IN ROOM EAR, ENG SU; CIRCULATOR ORIENTEE, PRESENT IN ROOM

Catheter, Drains, Tub - USC MOR

Post-Care Text:

A.310 Identifies factors associated with an increased risk for hemorrhage or fluid and electrolyte imbalance



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 nal Report \*

Im.250 Administers care to invasive device sites

	Entry 1	Entry 2
Device Description	TRAY CATHETERIZATION SURESTEP BARDEX COMPLETE CARE STATLOCK BACTI-GUARD NATURAL RUBBER OD14 FR FOLEY DRAINAGE BAG INFECTION CONTROL STERILE LATEX DISPOSABLE	DRAIN INCISION NOVATION PLUS SILICONE FLAT FULL FLUTE L20 CM X W10 MM STERILE
Device Type	Indwelling	Indwelling
Location	Bladder	Back mid
Alloon Inflation	10 ML	
Location Detail		
Present on Arrival?	No	No
Inserted By	Wilson RN, Daphne	Bonney, Phillip Alan
Removed at End of Case?	No	No
Removed By		
Drainage Details		
Drainage?	Yes	Yes
Amount	Measured in Milliliters (mL)	Minimal
Color	Yellow	
Consistency		
Drainage System	Dependent drainage bag	Suction Reservoir
Drainage Type		
Order		
Outcome Met (O.60)	Yes	Yes

Post-Care Text:

E.340 Evaluates tubes and drains are intact and functioning as planned O.60 Patient is free from signs and symptoms of injury caused by extraneous objects

General Comments:

10 MM JP DRAIN X2 TO MID BACK

Counts Verification - USC MOR

Pre-Care Text:

A.20 Verifies operative procedure, surgical site, and laterality A.20.2 Assesses the risk for unintended retained foreign body Im.20 Performs required counts

Entry 1

Procedure	Fusion Spine Lumbar Posterior		
Initial Counts			
Initial Counts	Wilson RN, Daphne,	Items included in	Sponges, Sharps
Performed By	Poorman, Chelsea	the Initial Count	
Wivity Count			
Closing Counts			
Closing Counts	Estrada RN, Andrea,	Items included in	Sponges, Sharps
Performed By	Poorman, Chelsea	the Closing Count	
Final Counts			
Final Count Status	Correct	Did you use Radio Frequency Wanding for this case?	No
Final Counts		Items Included in	
Performed By	Estrada RN, Andrea,	Final Count	Sponges, Sharps
Performed By	Poorman, Chelsea		
Outcome Met (O.20)	Yes		

Post-Care Text:

E.50 Evaluates results of the surgical count O.20 Patient is free from unintended retained foreign objects

Patient Positioning - USC MOR

Pre-Care Text:

A.240 Assesses baseline skin condition A.280 Identifies baseline musculoskeletal status A.280.1 Identifies

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physical alterations that require additional precautions for procedure-specific positioning A.510.8 Maintains patient's dignity and privacy Im.120 Implements protective measures to prevent skin/tissue injury due to mechanical sources Im.40 Positions the patient Im.80 Applies safety devices

Entry 1

Procedure	Fusion Spine Lumbar Posterior	Body Position	Prone
Left Arm Position	Overhead	Right Arm Position	Overhead
Left Leg Position	Elevated	Right Leg Position	Elevated
Net Uncrossed?	Yes	Pressure Points Checked	Yes
Additional Information	GEL PAD UNDER BILATERAL KNEES	Positioning Device	Board - Arm, Strap - Stafety, Elbow Protector, Positioner - Pillow, Table - Spinal, Positioner - Head, Strap - Arm, Tape
Positioned By	Estrada RN, Andrea, Nercisian, Aren, Wilson RN, Daphne, Bonney, Phillip Alan	Safety Strap Applied?	Yes
Location	Arms, Above Knees	Outcome Met (0.80)	Yes

Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue E.290 Evaluates musculoskeletal status 0.80 Patient is free from signs and symptoms of injury related to positioning

Assessment of Body - USC MOR

Entry 1

Date/Time Checked	12/01/17 14:11:00	Site	Arm, left, Arm, right, Head, Leg, right, Leg, left, Scrotal
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General Comments:

SKIN WARM TO TOUCH. PULSES PRESENT AND PALPABLE IN BUE AND BLE

Skin Prep - USC MOR

Pre-Care Text:

A.30 Verifies allergies A.20 Verifies procedure, surgical site, and laterality A.510.8 Maintains patient's dignity and privacy Im.270 Performs Skin Preparation Im.270.1 Implements protective measures to prevent skin and tissue injury due to chemical sources A.300.1 Protects from cross-contamination

Entry 1

Skin Prep Prep Agents (Im.270)	Iodine Povacrylex and Isopropyl Alcohol	Prep By	Bonney, Phillip Alan
Prep Area (Im.270)	Back	Prep Area Details	Posterior
Skin Prep Agent Dry Without Pooling	Yes		
Hair Removal Hair Removal Methods	No hair removal performed		
Outcome Met (0.100)	Yes		

Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue 0.100 Patient is free from signs and symptoms of chemical injury

General Case Data - USC MOR

Pre-Care Text:

A.350.1 Classifies surgical wound

Entry 1

Case Information OR	USC OR 07	Case Level	5
Wound Class	1-Clean	Specialty	Neurosurgery (SN)



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SA Class 2  
 eop Diagnosis Subluxation of L1/L2  
 lumbar vertebra,  
 initial encounter

st-Care Text:

O.760 Patient receives consistent and comparable care regardless of the setting

mpplant Log - USC MOR

se-Care Text:

A.20 Verifies operative procedure, surgical site, and laterality A.20.1 Verifies consent for planned procedure  
 Im.350 Records implants inserted during the operative or invasive procedure

	Entry 1	Entry 2	Entry 3
mpplant/Explant plant entification escription	Implant  SCREW BONE 5.5MM 45MM RELIN-O 2S SPINE POLYAXIAL NONSTERILE 5.5 X 45MM	Implant  SCREW BONE 5.5MM 50MM RELIN-O 2S SPINE POLYAXIAL NONSTERILE 5.5 X 50MM	Implant  SCREW BONE RELIN OD5.5 MM LOCK 5.5MM
Size erial Number ot Number anufacturer atalog # Expiration Date age Data Implant Site elect Left or ight when pplicable: uantity Outcome Met (0.30)	NUVASIVE 13015545  Spine-thoracic  2 Yes	NUVASIVE 13015550  Spine-thoracic  2 Yes	NUVASIVE 13550000  Spine-thoracic  8 Yes
	Entry 4	Entry 5	Entry 6
mpplant/Explant plant entification escription	Implant  ROD SPINAL RELIN-O COCR STRAIGHT L300 MM OD5.5 MM NONSTERILE 5.5MM X 300MM	Implant  CONNECTOR ROD 40-50MM RELIN-O SPINE CROSS ADJUSTABLE LOW PROFILE NONSTERILE 40-50MM	Implant  FILLER BONE VOID 20CC DBX ALLOGRAFT FREEZE DRIED MIX 20 CC 094160331111680021
Size erial Number ot Number anufacturer atalog # Expiration Date age Data Implant Site elect Left or ight when pplicable: uantity Outcome Met (0.30)	NUVASIVE 15455300  Spine-thoracic  2 Yes	NUVASIVE 10055440  Spine-thoracic  1 Yes	MUSCULOSKELETAL TRANSPLANT FOUNDATION 058200 04/28/19 Spine-thoracic  1 Yes
	Entry 7		
mpplant/Explant plant entification escription	Implant  6.0 X 50MM Ti SCREW		

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Size 6.0 X 50MM  
 Serial Number  
 Lot Number  
 Manufacturer NUVASIVE  
 Catalog # 13016050  
 Expiration Date  
 Usage Data  
 Implant Site Spine-thoracic  
 Select Left or  
 Right when  
 Applicable:  
 Quantity 4  
 Outcome Met (O.30) Yes

Post-Care Text:

E.30 Evaluates verification process for correct patient, site, side and level surgery O.30 Patient's procedure is performed on the correct site, side, and level

Medication Administration - USC MOR

Pre-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue O.10 Patient is free from

	Entry 1	Entry 2	Entry 3
Medication Administered	LIDOCAINE 1% with EPINEPHRINE 1:100,000 INJ, 20 ML INJ	THROMBIN TOPICAL 20,000 UNIT/1 VIAL (RECOMB)	BACITRACIN 50,000 UNITS/1 VIAL INJECTION
Route of Admin	Subcutaneous	Topical	Topical
Volume	10 mL		
Administered By	Bonney, Phillip Alan	Bonney, Phillip Alan	Bonney, Phillip Alan
Outcome Met (O.130)	Yes	Yes	Yes

Entry 4

Medication Administered  
 Medication MUPIROCIN OINTMENT 2%  
 22 gm (AKA BAC+B84TROBAN)  
 Route of Admin Topical  
 Volume  
 Administered By Nercisian, Aren  
 Outcome Met (O.130) Yes

Post-Care Text:

E.20 Evaluates response to medications O.130 Patient receives appropriately administered medication(s)

-Ray and Images - USC MOR

Pre-Care Text:

A.240 Assesses baseline skin condition A.240.1 Assesses history of previous radiation exposure Im.110 Implements protective measures to prevent injury due to radiation sources

Entry 1

	Spine-lumbar	X-Ray Type	C-Arm
Outcome Met (O.110)	Yes		

Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue O.110 Patient is free from signs and symptoms of radiation injury

Patient Care Devices - USC MOR

Pre-Care Text:

A.200 Assesses risk for normothermia regulation A.40 Verifies presence of prosthetics or corrective devices Im.280 Implements thermoregulation measures Im.60 Uses supplies and equipment within safe parameters

Entry 1

Entry 2

Entry 3

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Equipment Type	PUMP, ALP 501 COMPRESSION *USC 28869	WARMER BAIR HUGGER *USC 29701	TABLE OSI BASE WITH JACKSON TOP+C145 *USC 6003
Serial Number			
Settings (if applicable)			
Lead Number (if applicable)			
Site Sterilized			
Comments			
Outcome Met (0.700)	Yes	Yes	Yes

Post-Care Text:

E.10 Evaluates signs and symptoms of physical injury to skin and tissue 0.700 Patient is free from signs and symptoms of injury caused by extraneous objects

**Surgical Irrigation - USC MOR**

Pre-Care Text:

A.280 Verifies allergies A.310 Identifies factors associated with an increased risk for hemorrhage or fluid and electrolyte imbalance Im.210 Administers prescribed solutions A.280.1 Implements protective measures to prevent skin or tissue injury due to thermal sources

**Entry 1**

Irrigant	Yes	Irrigant Used:	BACITRACIN 50,000 UNITS IN 1 LITER LACTATED RINGERS (LR)
Outcome Met (0.300)	Yes		

Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue 0.300 Patient is free from signs and symptoms of injury due to thermal sources

**Autery - USC MOR**

Pre-Care Text:

A.240 Assesses baseline skin condition A.280.1 Identifies baseline musculoskeletal status Im.50 Implements protective measures to prevent injury due to electrical sources Im.60 Uses supplies and equipment within safe parameters Im.80 Applies safety devices

**Entry 1**

**Entry 2**

**Entry 3**

EU Type	Bipolar Unit	Electrosurgical Unit	Electrosurgical Unit
Identification Number	102813	FlF18042A	F8C59740A
Accessories Used			
EU Settings			
Bipolar Setting	45		
Blend Setting			
Coag Setting		45	45
Cut Setting		45	45
Instrument/Model			
Type			
Other Settings			
Percentage			
Power Level			
Temperature (Celsius)			
Total Time Used			
Grounding Pad			
Details			
Grounding Pad	No	Yes	Yes
Reed?			
Grounding Pad Lot Number		72710356X	72210153X
Within Expiration Date?		Yes	Yes
Grounding Pad Site		Thigh	Thigh
Grounding Pad Site		Left	Right

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etail  
 Hair Removed Under No No  
 Grounding Pad  
 Hair Removed Using:  
 Skin Condition Intact Intact  
 Under Grounding Pad  
 Verified By Estrada RN, Andrea Estrada RN, Andrea  
 Smoke Evacuation No No  
 Device Used  
 Smoke Evacuation  
 Unit:  
 Outcome Met (0.10) Yes Yes Yes

Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue 0.10 Patient is free from signs and symptoms of injury related to thermal sources

Dressing/Packing - USC MOR

Pre-Care Text:

A.350 Assesses susceptibility for infection Im.250 Administers care to invasive devices Im.290 Administer care to wound sites Im.300 Implements aseptic technique

Entry 1

Skin Prep Agent NA  
 Moved Prior to  
 Dressing?  
 Dressing Item  
 Details  
 Dressing Item Other: See comments  
 (Im.290)  
 Site Back lower, Back mid Site Details Posterior  
 Outcome Met (0.200) Yes

Post-Care Text:

E.320 Evaluate factors associated with increased risk for postoperative infection at the completion of the procedure 0.200 Patient's wound perfusion is consistent with or improved from baseline levels

Wound Comments:

MUPIROCIN OINTMENT 2%, ISLAND DRESSING APPLIED TO INCISION SITE

Communication - USC MOR

Entry 1

Communication RN Report to Unit/Floor Communication By Estrada RN, Andrea  
 Date and Time 12/01/17 13:40:00

Skin Assessment - USC MOR

Pre-Care Text:

A.240 Assesses baseline skin condition Im.120 Implements protective measures to prevent skin or tissue injury due to mechanical sources Im.280.1 Implements protective measures to prevent skin or tissue injury due to thermal sources Im.360 Monitors for signs and symptoms of infection

Entry 1

Skin Integrity Intact Skin Condition Tattoo  
 Outcome Met (0.60) Yes

Post-Care Text:

E.10 Evaluates for signs and symptoms of physical injury to skin and tissue E.270 Evaluate tissue perfusion 0.60 Patient is free from signs and symptoms of injury caused by extraneous objects

Safety Checklist 3) Sign Out - USC MOR

Pre-Care Text:

Im.330 Manages specimen handling and disposition

Entry 1

Nurse verbally Yes Nurse verbally NA



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Confirms with team the name of the operative procedure(s) and correct CPT code Nurse verbally confirms with team by equipment problems to be addressed Are the instrument, sponge, and needle counts correct?	Yes	Confirms with team specimen identity and label  The nurse confirmed with the surgeon and the incision is:	Closed
Is this case a trauma case? Is an implant used on this case?	No Yes	All team members review key concerns for recovery and management of patient Was this an endoscopic case?	Yes No

Post-Care Text:

E.800 Ensures continuity of care E.50 Evaluates results of the surgical count

Departure from OR - USC MOR

Entry 1

Transport Time	12/01/17 14:48:00	Patient Handoff Status	Drowsy
Transfer Evaluation Reassessment	ESU Pad Site Checked, Tubes Drains Chains Secured, Warm Blanket Applied, Pressure Areas Checked, Sterile Dressing Intact Extubated	Skin Condition	Warm, Dry
Patient Handoff Status	Extubated	Oxygen in Use?	Yes
Flow Rate	6 L/min	Airway Device	Nasal Cannulae or Mask
Patient IV Access	Yes	Post-op Destination	ICU
Room	Bed		
Discharge			
Report Given By	Estrada RN, Andrea	Report Given To	Gongwer, Genevieve
Time	12/01/17 14:55:00		
Discharged/Transferred			

Use Comments

<None>

Finalized By: Estrada RN, Andrea

Document Signatures

Signed By:

Estrada RN, Andrea 12/01/17 15:04